# TITLE V BLOCK GRANT APPLICATION FORMS (1-21) STATE: NM

APPLICATION YEAR: 2006

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APPLICATION FOR FEDERAL ASSIS		. DATE SUBMITTED 1/15/2005		APPLICANT IDENTIFIER			
1. TYPE OF SUBMISSION:	3	. DATE RECEIVED E	BY STATE	STATE APPLICATION IDENTIFIER			
Application Construction Non-Construction Pre-application Construct Non-Construction	ction 4	. DATE RECEIVED E	BY FEDERAL AGENCY	FEDERAL IDENTIFIER			
5. APPLICANT INFORMATION							
Legal Name: New Mexico Department of Health		Organizational Unit: Family Health Bure					
Address (give city, county, state and zip code) 2040 S. Pacheco St. Suite 101		! <u></u>	e number of the person to	be contacted on matters involving this			
Santa Fe, NM 87505 County:		Name: Jane C. Pea Tel Number: 505-47					
6. EMPLOYER IDENTIFICATION NUMBER (EI	N):	7. TYPE OF APPLIC	CANT: (Enter appropriate	letter in box) A			
85 600056	5 5	B. County C. Municiple D. Township E. Interstate	H. Independent School Di I. State Controlled Instituti J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify)				
8. TYPE OF APPLICATION:		9 NAME OF FEDER		ition, Maternal and Child Health Bureau			
New Continuation Revision  If Revision, enter appropriate letter(s) in box(es)  A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		Treatiff Resources and Services Administration, Maternal and Office Present					
10. CATALOG OF FEDERAL DOMESTIC ASSINUMBER:	STANCE	11. DESCRIPTIVE	TITLE OF APPLICANT'S I :	PROJECT:			
9 3 9 9 4  TITLE: Maternal and Child Health Services BI  12. AREAS AFFECTED BY PROJECT (cities, citates, etc.):  State							
13. PROPOSED PROJECT:		14. CONGRESSION	IAL DISTRICTS OF:				
Start Date: Ending Date: 09/30/2006		a. Applicant NM Districts 1-2-3		o. Project NM Districts 1-2-3			
15. ESTIMATED FUNDING: 16	. IS APPLICATI	ON SUBJECT TO RE	VIEW BY STATE EXECU	JTIVE ORDER 12372 PROCESS?			
a. Federal \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ORDER 12372 DATE:	EAPPLICATION/APF 2 PROCESS FOR RE GRAM IS NOT COVE	VIEW ON	VAILABLE TO THE STATE EXECUTIVE			
d. Local \$ 0.00	OR P	ROGRAM HAS NOT	BEEN SELECTED BY ST	ATE FOR REVIEW			
e. Other \$ 0.00							
f. Program   \$ 0.00							
g TOTAL \$ 10,201,200,000 =	_	CANT DELINQUENT attach an explanation	ON ANY FEDERAL DEB	Т			
18. TO THE BEST OF MY KNOWLEDGE AND DOCUMENT HAS BEEN DULY AUTHORIZED ATTACHED ASSURANCES IF THE ASSISTAN	BY THE GOVE	RNING BODY OF TH					
a. Typed Name of Authorized Representative Michelle Lujan Grisham			b. Title Secretary	c. Telephone Number 1-505-827-2613			
d. Signature of Authorized Representative				e. Date Signed			

Previous Editions Not Usable

Standard Form 424 (REV. 4-88) Prescribed by OMB A-102

	FORM 2  T DETAILS FOR FY 2006	
	04 (d) and 505(a)(3)(4)] STATE: NM	
FEDERAL ALLOCATION (Item 15a of the Application Face Sheet [SF 424]) Of the Federal Allocation (1 above), the amount earmarked for:		\$ 4,688,570
A.Preventive and primary care for children:		
\$ 2,252,545 ( 48.04%)		
B.Children with special health care needs:		
\$ 1,636,218 ( 34.9 %) (If either A or B is less than 30%, a waiver request must accompany	the application)[Sec. 505(a)(3)]	
C.Title V admininstrative costs:	tile application/[Sec. 303(a)(3)]	
\$ 118,950 ( 2.54%) (The above figure cannot be more than 10%)[Sec. 504(d)]		
2. UNOBLIGATED BALANCE (Item 15b of SF 424)		\$0
3. STATE MCH FUNDS (Item 15c of the SF 424)		\$ 5,512,630
4. LOCAL MCH FUNDS (Item 15d of SF 424)		\$0
5. OTHER FUNDS (Item 15e of SF 424)		\$0
6. PROGRAM INCOME (Item 15f of SF 424)		\$0
7. TOTAL STATE MATCH (Lines 3 through 6) (Below is your State's FY 1989 Maintainence of Effort Amount) \$ 3,087,900		\$ 5,512,630
8. FEDERAL-STATE TITLE V BLOCK GRAI (Total lines 1 through 6. Same as line 15g of SF 424)	NT PARTNERSHIP (SUBTO	<b>TAL)</b> \$ 10,201,200
<b>9. OTHER FEDERAL FUNDS</b> (Funds under the control of the person responsible for the administration	on of the Title V program)	
a. SPRANS:	\$0	1
b. SSDI:	\$100,000	<u>.</u>
c. CISS:	\$0	<u> </u>
d. Abstinence Education:	\$ 502,785	_
e. Healthy Start:	\$0	_
f. EMSC:	\$0	) <del>-</del>
g. WIC:	\$ 48,801,233	
h. AIDS:	\$0	
i. CDC:	\$0	<del>-</del> <u> </u>
j. Education:	\$ 0	<del>-</del> 
k. Other:		•
Other Grants and Rev	\$	_
SECCS	\$ 100,000	-    -
10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds of	under item 9)	\$ 56,697,518
11. STATE MCH BUDGET TOTAL (Partnership subtotal + Other Federal MCH Funds subtotal)		\$ 66,898,718

FORM NOTES FOR FORM 2
None

FIELD LEVEL NOTES

None

#### STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

	FY 2	2004	FY 2	2005	FY 2	2006
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$4,798,959	\$4,770,264	\$	\$0	\$4,688,570	\$0
2. Unobligated Balance (Line2, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
3. State Funds (Line3, Form 2)	\$5,245,241	\$ 6,086,950	\$5,193,300	\$0	\$5,512,630	\$0
4. Local MCH Funds (Line4, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
5. Other Funds (Line5, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
6. Program Income (Line6, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
7. Subtotal (Line8, Form 2)	\$10,044,200	\$10,857,214	\$10,011,000	\$0	\$10,201,200	\$0
		(THE FEI	DERAL-STATE TITLE E	BLOCK GRANT PARTN	NERSHIP)	
8. Other Federal Funds (Line10, Form 2)	\$37,092,300	\$56,712,033	\$ 48,351,200	\$0	\$56,697,518	\$0
9. Total (Line11, Form 2)	\$47,136,500	\$ 67,569,247	\$ 58,362,200	\$0	\$ 66,898,718	\$0
			(STATE MCH B	UDGET TOTAL)		

#### STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

	FY 2	2001	FY 2	2002	FY 2	2003
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$4,700,000	\$4,677,717	\$4,680,400	\$4,817,660	\$4,817,700	\$4,817,660
2. Unobligated Balance (Line2, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
3. State Funds (Line3, Form 2)	\$4,833,000	\$5,991,453	\$5,777,400	\$5,371,010	\$5,677,200	\$5,790,520
4. Local MCH Funds (Line4, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
5. Other Funds (Line5, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
6. Program Income (Line6, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0
7. Subtotal (Line8, Form 2)	\$9,533,000	\$ 10,669,170	\$ 10,457,800	\$10,188,670	\$10,494,900	\$10,608,180
		(THE FEI	DERAL-STATE TITLE E	BLOCK GRANT PARTN	IERSHIP)	
8. Other Federal Funds (Line10, Form 2)	\$36,024,900	\$ 36,024,900	\$ 45,912,500	\$ 53,938,418	\$ 48,944,300	\$\$
9. Total (Line11, Form 2)	\$45,557,900	\$ 46,694,070	\$56,370,300	\$ 64,127,088	\$59,439,200	\$ 52,667,998
			(STATE MCH B	UDGET TOTAL)		

None

#### **FIELD LEVEL NOTES**

Section Number: Main

Field Name: FedAllocExpended Row Name: Federal Allocation Column Name: Expended

Year: 2004 Field Note:

Expended entire Title V Block Grant. Block Grant from 2004 was reduced as compared to the FY2003 budget due to federal budget cuts.

Section Number: Main

Field Name: StateMCHFundsExpended

Row Name: State Funds Column Name: Expended

Year: 2004 Field Note:

State funds expended were in excess of original budget due to Governor intervention to meet need of the state with regard to serving immigrants. Special appropriation was made of \$841,709.00 in excess of original budget.

Section Number: Main Field Name: OtherFedFundsExpended Row Name: Other Federal Funds Column Name: Expended

Year: 2003 Field Note:

Contributions include a new Abstinence Grant for \$516,100 which the program inherited during the last year.

Section Number: Main

Field Name: OtherFedFundsExpended Row Name: Other Federal Funds Column Name: Expended

Year: 2004 Field Note:

Note: Original budget underestimated the amount of other federal funds contributed by the WIC Program to the Partnership.

#### BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

	FY 2004			FY 2005				FY 2006			
I. Federal-State MCH Block Grant Partnership	But	OGETED	Exi	PENDED	Buc	GETED	EXPENDED	В	UDGETED	EXPENDED	
a. Pregnant Women	\$	1,526,140	\$	1,340,368	\$	1,042,396	\$	\$_	1,257,225	\$0	
b. Infants < 1 year old	\$	416,832	\$	491,382	\$	204,076	\$	\$_	0	\$0	
c. Children 1 to 22 years old	\$	3,751,488	\$	4,422,456	\$	4,571,919	\$	\$_	4,846,265	\$0	
d. Children with Special Healthcare Needs	\$	4,221,440	\$	4,487,102	\$	4,081,534	\$	\$_	3,978,760	\$0	
e. Others	\$	0	\$	0	\$	0	\$	\$_	0	\$0	
f. Administration	\$	128,300	\$	115,906	\$	111,075	\$	\$_	118,950	\$0	
g. SUBTOTAL	\$	10,044,200	\$	10,857,214	\$	10,011,000	\$0	\$_	10,201,200	\$0	
II. Other Federal Funds (under the o	ontro	ol of the person re	espo	nsible for admini	strati	on of the Title V	program).				
a. SPRANS	\$	0			\$	0		\$_	0		
b. SSDI	\$	100,000			\$	96,000		\$	100,000		
c. CISS	\$	0			\$	90,900		\$_	0		
d. Abstinence Education	\$	516,100			\$	516,100		\$_	502,785		
e. Healthy Start	\$	0			\$	0		\$_	0		
f. EMSC	\$	0			\$	0		\$	0		
g. WIC	\$	33,212,000			\$	47,529,800		\$_	48,801,233		
h. AIDS	\$	0			\$	0		\$_	0		
i. CDC	\$	195,500			\$	118,400		\$_	0		
j. Education	\$	0			\$	0		\$	0		
k.Other	]										
Other Grants and Rev	\$	0			\$	0		\$_	7,193,500		
SECCS	\$	0			\$	0		\$_	100,000		
All Other	\$	2,950,300			\$	0		\$_	0		
PRAMS	\$	118,400			\$	0		\$_	0		
III. SUBTOTAL	\$	37,092,300			\$	48,351,200		\$	56,697,518		

#### BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

		FY 2	200	1	FY 2002					FY 2003			
I. Federal-State MCH Block Grant Partnership	Bud	GETED	Ex	PENDED	Βυ	DGETED	Ex	PENDED	Вυ	DGETED	Ex	PENDED	
a. Pregnant Women	\$	944,436	\$	1,368,641	\$	1,188,819	\$	1,556,846	\$	1,193,629	\$_	1,285,444	
b. Infants < 1 year old	\$	237,386	\$	60,835	\$	367,797	\$	417,992	\$	42,837	\$	220,877	
c. Children 1 to 22 years old	\$	2,813,436	\$	5,138,698	\$	3,455,258	\$	3,761,936	\$	3,618,441	\$	4,566,155	
d. Children with Special Healthcare Needs	\$	5,334,900	\$	4,019,761	\$	5,243,084	\$_	4,356,633	\$	5,469,250	\$_	4,437,479	
e. Others	\$	0	\$	0	\$	0	\$_	0	\$	0	\$_	0	
f. Administration	\$	202,842	\$	81,235	\$	202,842	\$_	95,263	\$	170,743	\$_	98,225	
g. SUBTOTAL	\$	9,533,000	\$	10,669,170	\$	10,457,800	\$	10,188,670	\$	10,494,900	\$	10,608,180	
II. Other Federal Funds (under the	contro	l of the person re	espo	onsible for admini	strat	ion of the Title V	prog	ıram).					
a. SPRANS	\$	0			\$	0			\$	0			
b. SSDI	\$	129,000			\$	100,000			\$	96,000			
c. CISS	\$	0			\$	0			\$	0			
d. Abstinence Education	\$	787,700			\$	0			\$	787,700			
e. Healthy Start	\$	0			\$	0			\$	0			
f. EMSC	\$	0			\$	0			\$	0			
g. WIC	\$	31,977,900			\$	41,986,900			\$	43,893,200			
h. AIDS	\$	0			\$	0			\$	0			
i. CDC	\$	141,100			\$	76,200			\$	195,500			
j. Education	\$	0			\$	0			\$	0			
k.Other	]		1				ı						
Other	\$	0			\$	0			\$	672,100			
SLD Hemoglobinopathy	\$	0			\$	93,900			\$	117,300			
Title X	\$	1,879,800			\$	172,000			\$	3,182,500			
Other Federal Funds	\$	0			\$	3,169,000			\$	0			
Title 19 Medicaid	\$	0			\$	314,500			\$	0			
Prevention Block Grant	\$	21,200			\$	0			\$	0			
SLD Hemoglobinopothy	\$	230,900			\$	0			\$	0			
Title 19	\$	857,300			\$	0			\$	0			
III. SUBTOTAL	\$	36,024,900			\$	45,912,500			\$	48,944,300			

The amount expended on pregnant women is less than the budgeted amount because there were budget cuts to the state budget this year.

The amount expended on children and adolescents is more than the budgeted amount because of priority changes within the new administration

#### FIELD LEVEL NOTES

1. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: PregWomenExpended Row Name: Pregnant Women Column Name: Expended

Year: 2003 Field Note:

Costs increased for high risk prenatal care fund

2. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: PregWomenExpended Row Name: Pregnant Women Column Name: Expended

Year: 2004 Field Note:

The amount expended on pregnant women is more than 10 percent less than that in the projected budget. The State serves all pregnant women that present in its clinics and this year there were no women turned away from services. More was expended on children this year as evidenced by the fact that expenditures exceeded budget in that category.

3. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: Children\_0\_1Expended Row Name: Infants <1 year old Column Name: Expended

Year: 2003 Field Note:

This amount represents 5% of the amount spent on Children and Adolescents. There is not a way to differentiate infant services at this time. We will work on this next year.

4. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: Children\_0\_1Expended Row Name: Infants <1 year old Column Name: Expended

Year: 2004 Field Note:

More was expended on infants than originally budgeted due to the state supplemental funding

5. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: Children\_1\_22Expended Row Name: Children 1 to 22 years old

Column Name: Expended

Year: 2003 Field Note:

The State expended more than was budgeted for services to Children and Adolescents.

5. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: Children\_1\_22Expended Row Name: Children 1 to 22 years old

Column Name: Expended

Year: 2004 Field Note:

More was expended on children and youth this year than budgeted in our projections. This is due to an ever increasing need for services to undocumented children and youth as well as the Governor's decision to replace the Healthier Kids fund, an infusion of \$800,000.00 to serve those who do not qualify for Medicaid or SCHIP in primary and dental care.

7. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: CSHCNExpended Row Name: CSHCN Column Name: Expended

Year: 2003 Field Note:

The budget was reduced midyear.

8. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: AllOthersExpended Row Name: All Others Column Name: Expended Year: 2003

Field Note:

This is a place holder

9. Section Number: I. Federal-State MCH Block Grant Partnership

Field Name: AdminExpended Row Name: Administration Column Name: Expended

Year: 2003 Field Note:

Monies that were originally budgeted for administration, i.e. media contracts were changed to cover High Risk Prenatal Care Fund costs for immigrants.

#### STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

TYPE OF SERVICE	FY 2	2004	FY 2	2005	FY 2006		
TIPE OF SERVICE	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$4,681,624	\$5,598,254	\$5,017,260	\$0	\$	\$0	
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$3,083,514	\$3,063,184	\$3,076,298	\$0	\$3,540,362	\$0	
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 241,300	\$ <u>173,751</u>	\$188,930	\$0	\$ 165,440	\$0	
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$2,037,762	\$2,022,025	\$1,728,512	\$0	\$1,848,466	\$0	
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$10,044,200	\$10,857,214	\$10,011,000	\$0	\$10,201,200	\$0	

#### STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

Type of Service	FY 2	2001	FY :	2002	FY 2003		
TIPE OF SERVICE	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$4,057,900	\$ 4,288,591	\$	\$	\$ 4,009,250	\$5,585,066	
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$	\$3,079,962	\$3,878,300	\$	\$3,632,550	\$3,103,323	
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$\$353,600	\$ 273,671	\$\$	\$1,732,606	\$ 206,100	\$178,487	
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$	\$3,026,946	\$	\$\$	\$	\$1,741,304	
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$9,533,000	\$10,669,170	\$10,457,800	\$10,188,670	\$10,494,900	\$10,608,180	

None

#### FIELD LEVEL NOTES

1. Section Number: Main

Field Name: DirectHCBudgeted Row Name: Direct Health Care Services

Column Name: Budgeted

Year: 2006 Field Note:

The State's new administration usually starts out the year with a smaller budget than they allocate later in the year. The original budget allocated to Title V of state funds is much less than the program needs to maintain services. However, during the midyear review, the administration reconsiders program expenses and usually allocates more state funding for the last half of the year.

It has become necessary to spend most of our grant on direct services as more and more people who do not qualify for either Medicaid or SCHIP need safety net services.

This has been discussed with Peter Van Dyck at MCHB.

2. Section Number: Main

Field Name: DirectHCExpended Row Name: Direct Health Care Services

Column Name: Expended

Year: 2003 Field Note:

Expenditures increased in direct services due to need for safety net services (high risk prenatal care fund for immigrants) and increases in cost of operations. Funds from state were used to cover the cost of the immigrant prenatal care.

3. Section Number: Main

Field Name: DirectHCExpended Row Name: Direct Health Care Services

Column Name: Expended

Year: 2004 Field Note:

The State had a new administration take administrative control of the Department of Health. Due to projected budget shortfalls, the original budget allocThe State had a new administration take administrative control of the Department of Health. Due to projected budget shortfalls, the original budget allocated to Title V of state funds was much less than the program needed to maintain services. During the midyear review, the administration realized that it had undercut the program and allocated more state funding for the last half of the year.

It has become necessary to spend most of our grant on direct services as more and more people who do not qualify for either Medicaid or SCHIP need safety net services.

This has been discussed with Peter Van Dyck at MCHB.

4. Section Number: Main Field Name: EnablingBudgeted Row Name: Enabling Services Column Name: Budgeted

Year: 2006 Field Note:

Although the amount budgeted is greater than last year, it may be necessary to move funds to direct services at midyear review.

 Section Number: Main Field Name: EnablingExpended

Row Name: Enabling Services Column Name: Expended

Year: 2003 Field Note:

Budget amounts were cut in contracts for enabling services later in the year to reflect a 7 million dollar deficit in the department.

6. Section Number: Main Field Name: EnablingExpended Row Name: Enabling Services

Column Name: Expended Year: 2004 Field Note:

Funds for contracts for enabling services were cut in favor of funding direct services.

7. Section Number: Main

Field Name: PopBasedBudgeted Row Name: Population-Based Services

Column Name: Budgeted

Year: 2006 Field Note:

It has become necessary to spend funds meant for population based services on safety net direct services due to Medicaid cuts and the fact these clients are not qualified for SCHIP either.

8. Section Number: Main

Field Name: PopBasedExpended Row Name: Population-Based Services

Column Name: Expended

Year: 2003 Field Note:

Media contracts were cut by the department in a measure to save state funds. Due to a decrease in SIDS the contract for grief counseling for SIDS families was decreased.

9. Section Number: Main

Field Name: PopBasedExpended Row Name: Population-Based Services

Column Name: Expended

Year: 2004 Field Note:

ried Note.

It has become necessary to spend funds meant for population based services on safety net direct services due to Medicaid cuts and the fact they are not qualified for SCHIP either.

10. Section Number: Main

Field Name: InfrastrBuildBudgeted Row Name: Infrastructure Building Services

Column Name: Budgeted

Year: 2006 Field Note:

Although the amount budgeted is greater than last year, it may be necessary to move the funds to direct services at midyear budget review

11. Section Number: Main Field Name: InfrastrBuildExpended Row Name: Infrastructure Building Services

Column Name: Expended

Year: 2003 Field Note:

Funding for infrastructure was diverted to direct services to meet the need for high risk prenatal counseling for immigrants (over match state funded) and increased costs of providing direct services.

12. Section Number: Main

Field Name: InfrastrBuildExpended Row Name: Infrastructure Building Services

Column Name: Expended

Year: 2004 Field Note:

Funds for infrastructure were reduced slightly in favor of increased direct services.

			FORM 6											
NUMBER AND PE	NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED													
Sect. 506(a)(2)(B)(iii)														
STATE: NM														
	27.704													
Total Births by Occurrence: 27,791 Reporting Year: 2004														
Type of Screening Tests  (A)  (B)  No. of Presumptive Positive Pos														
	No.	%	Screens	Cases (2)	No.	%								
Phenylketonuria	27,649	99.5	32	1	1	100								
Congenital Hypothyroidism	27,649	99.5	364	15	15	100								
Galactosemia	27,649	99.5	149	1	1	100								
Sickle Cell Disease	27,649	99.5	325	0	0									
Other Screening	(Specify)													
Biotinidase Deficiency	27,649	99.5	2	1	1	100								
Congenital Adrenal Hyperplasia (CAH)	27,649	99.5	54	0	0									
Screening Progra	ams for Older Ch	ildren & Wome	n (Specify Tests	by name)										
(1) Use occurrent (2) Report only tho (3) Use number of	se from resident	births.												

FORM NOTES FOR FORM 6
None

FIELD LEVEL NOTES

None

## Number of Individuals Served (Unduplicated) under Title V (BY Class of Individuals and Percent of Health Coverage)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: NM

Reporting Year: 2004

	TITLE V		PRIMAR	Y SOURCES OF COV	'ERAGE	
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	15,760	80.0	0.0	2.0	18.0	0.0
Infants < 1 year old	27,649	47.0	0.7	42.0	9.6	0.0
Children 1 to 22 years old	28,021	21.5	0.0	0.0	0.0	78.5
Children with Special Healthcare Needs	5,765	0.0	0.0	0.0	100.0	0.0
Others	24,578	47.0	0.0	0.0	0.0	53.0
TOTAL	101,773					
		•				

None

#### FIELD LEVEL NOTES

I. Section Number: Main Field Name: PregWomen\_TS Row Name: Pregnant Women Column Name: Title V Total Served

Year: 2006

Field Note:

2004 prenatal clients: The Title V program is the organizational home to NM WIC; in addition to the infrastructure-level coverage of WIC, there are direct, enabling services provided by Title V MCH related services. Therefore, an estimated 57% of all pregnant women report they were on WIC during prenatal period using PRAMS data. The total number was served was estimated at 15,760. Within this number there were direct services documented as 827 clinical prenatal care in local health offices, 431 by M&I contract with title V MCH, 523 paid by Title V Hi Risk Prenatal Fund, 3,000 served through the Families FIRST Perinatal Case Management.

 Section Number: Main Field Name: PregWomen\_XIX Row Name: Pregnant Women Column Name: Title XIX %

Year: 2006 Field Note:

Using the WIC based estimate of 15760 women served, an estimated 80% were eligible for Medicaid.

S. Section Number: Main Field Name: PregWomen\_XXI Row Name: Pregnant Women Column Name: Title XXI %

Year: 2006 Field Note:

S-CHIP does not cover prenatal care in NM

4. Section Number: Main

Field Name: PregWomen\_Private Row Name: Pregnant Women Column Name: Private/Other %

Year: 2006 Field Note:

An estimated 315 women or 2% had private or other form of payment for care, such as cash & sliding scales.

5. Section Number: Main

Field Name: PregWomen\_None Row Name: Pregnant Women Column Name: None %

Year: 2006 Field Note:

An estimate 18% of women had no form of insurance; this includes all of the women served by the High Risk Prenatal Fund, the local health offices and those served under contract to the M&I Project located at UNM.

Section Number: Main
 Field Name: Children\_0\_1\_TS
 Row Name: Infants <1 year of age
 Column Name: Title V Total Served</li>

Year: 2006 Field Note:

Infants served based on newborn genetic screen 27,649. The program reported it served 99.5% of NM occurrent births.

 Section Number: Main Field Name: Children\_1\_22\_TS Row Name: Children 1 to 22 years of age

Column Name: Title V Total Served

Year: 2006 Field Note:

Children served in 2004 included 1,129 Healthier Kids Fund; and 26,892 children immunized. The estimates of insurance coverage are very rough.

8. Section Number: Main Field Name: CSHCN TS

Row Name: Children with Special Health Care Needs

Column Name: Title V Total Served

Year: 2006 Field Note:

2004 CSHCN included 4,992 served by the Children's Medical Services Program (CMS) and 773 are children in the early intervention program and receive care coordination by the CMS social workers. The count does not include all children who received specialty services due to CMS client services data system design.

 Section Number: Main Field Name: AllOthers\_TS Row Name: Others

Column Name: Title V Total Served

Year: 2006 Field Note:

Others are family planning clients served in local health offices; 26,892 females and 1,129 males. the estimate of Medicaid paid is very rough.

### FORM 8 DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX (BY RACE AND ETHNICITY) [Sec. 506(A)(2)(C-D)] STATE: NM

Reporting Year: 2004

#### I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	27,791	23,017	497	3,861	351	63	0	2
Title V Served	15,760	13,053	224	2,190	199	36	0	58
Eligible for Title XIX	12,865	10,612	245	1,697	160	30	0	121
INFANTS								
Total Infants in State	27,791	23,017	497	3,861	351	63	0	2
Title V Served	26,804	22,109	511	3,536	333	63	0	252
Eligible for Title XIX	12,865	10,612	245	1,697	160	30	0	121

#### II. UNDUPLICATED COUNT BY ETHNICITY

				HISPA	ANIC OR LATING	(Sub-categorie	s by country or area o	of origin)
	( A ) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	( B.1 ) Mexican	( B.2 ) Cuban	( B.3 ) Puerto Rican	( B.4 ) Central and South American	( B.5 ) Other and Unknown
DELIVERIES								
Total Deliveries in State	13,280	14,511	0	0	0	0	0	0
Title V Served	7,531	8,229	0	0	0	0	0	0
Eligible for Title XIX	5,892	7,223	0	0	0	0	0	0
INFANTS								
Total Infants in State	13,280	14,511	0	0	0	0	0	0
Title V Served	11,794	15,010	0	0	0	0	0	0
Eligible for Title XIX	5,892	7,223	0	0	0	0	0	0

The DOH client data system does not capture race& ethnicity AND payor of care with any precision. Notations can be made if client is on Medicaid. Race-ethnicity categories are not a tight match. Unduplicated count by delivery, infant is pretty good.

#### FIELD LEVEL NOTES

Section Number: I. Unduplicated Count By Race

Field Name: DeliveriesTotal\_All Row Name: Total Deliveries in State Column Name: Total All Races

Year: 2006 Field Note:

Occurent births; provisional 2004. 27,791.

Section Number: I. Unduplicated Count By Race

Field Name: DeliveriesTitleV\_All Row Name: Title V Served Column Name: Total All Races

Year: 2006 Field Note:

2004 prenatal clients: The Title V program is the organizational home to NM WIC; in addition to the infrastructure-level coverage of WIC, there are direct, enabling services provided by Title V MCH related services. Therefore, an estimated 57% of all pregnant women report they were on WIC during prenatal period using PRAMS data. The total number was served was estimated at 15,760. Within this number there were direct services documented as 827 clinical prenatal care in local health offices, 431 by M&I contract with title V MCH, 523 paid by Title V Hi Risk Prenatal Fund, 3,000 served through the Families FIRST Perinatal Case Management.

Section Number: I. Unduplicated Count By Race

Field Name: DeliveriesTitleXIX\_All Row Name: Eligible for Title XIX Column Name: Total All Races

Year: 2006 Field Note:

None of the women who receive prenatal care in the through the Title V MCH program are Medicaid eligible. They include 431 served through contract with the M&I project; 735 whose care was paid by the High Risk Prenatal Fund; and 962 whose care was provided in local health offices.

Section Number: I. Unduplicated Count By Race

Field Name: InfantsTotal\_All Row Name: Total Infants in State Column Name: Total All Races

Year: 2006 Field Note:

total is 27,791. the number is correct

Section Number: I. Unduplicated Count By Race

Field Name: InfantsTitleV\_All Row Name: Title V Served Column Name: Total All Races

Year: 2006 Field Note:

The Title V served is an estimate based on the number of newborns who had genetic screening; the race-ethnicity distribution is estimated based on the percent race ethnicity reported by NM VRHS for occurrent births.

Section Number: I. Unduplicated Count By Race

Field Name: InfantsTitleXIX\_All Row Name: Eligible for Title XIX Column Name: Total All Races

Year: 2006 Field Note:

This is an estimate based on 48% of infants being eligible for Medicaid in 2003-04.

Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal\_TotalNotHispanic Row Name: Total Deliveries in State Column Name: Total Not Hispanic or Latino

Year: 2006 Field Note:

The total occurrent births was 27,791. total with Hispanic ethnicity 14,511 and non-Hispanic 13,280. The numbers are correct.

Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal\_TotalHispanic Row Name: Total Deliveries in State Column Name: Total Hispanic or Latino

Year: 2006 Field Note:

This number is correct. 14,511

Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV\_TotalNotHispanic Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2006

Field Note:

The data are correctly entered. The programs that report race-ethnicity and payor of care are lacking precision.

Programs reporting clients, do not collect sub-category information requested on Hispanic or Latino country of origin

10. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV\_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2006

Field Note:

Programs including Medicaid reporting services do not collect data about country or origin -Hispanic or Latino .

Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV\_Mexican

Row Name: Title V Served Column Name: Mexican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

12. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV\_Cuban

Row Name: Title V Served Column Name: Cuban

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

13. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV\_PuertoRican

Row Name: Title V Served Column Name: Puerto Rican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

 Section Number: II. Unduplicated Count by Ethnicity Field Name: DeliveriesTitleV\_CentralAmerican

Row Name: Title V Served

Column Name: Central and South American

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

15. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV\_EthnicityOther Row Name: Title V Served

Column Name: Other and Unknown

Year: 2006 Field Note:

Year: 2006

Programs including Medicaid reporting services do not collect this data.

 Section Number: II. Unduplicated Count by Ethnicity Field Name: DeliveriesTitleXIX\_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2006 Field Note:

none of the women served by Title V were Medicaid eligible. Medicaid does not report country - area of origin of Hispanic-Latino clients.

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

17. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_TotalHispanic
Row Name: Eligible for Title XIX
Column Name: Total Hispanic or Latino

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accommodate this gap in information without punishing data folks. with kind thanks.

18. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_NotReported

Row Name: Eligible for Title XIX
Column Name: Ethnicity Not Reported

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect data about country or origin -Hispanic or Latino .

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

19. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_Mexican
Row Name: Eligible for Title XIX
Column Name: Mexican

Year: 2006

Field Note:

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

20. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_Cuban Row Name: Eligible for Title XIX

Column Name: Cuban Year: 2006

Field Note:

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program

collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

#### 21. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_PuertoRican

Row Name: Eligible for Title XIX Column Name: Puerto Rican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

#### Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_CentralAmerican

Row Name: Eligible for Title XIX

Column Name: Central and South American

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

#### 23. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_EthnicityOther

Row Name: Eligible for Title XIX Column Name: Other and Unknown

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

NOTE TVIS SYSTEM: writing the same note, over and over again, in each and every cell for the Hispanic or Latino origin by area or country, and for which no program collects the data, is like being punished for not having the data. Please do something to accomodate this gap in information without punishing data folks. with kind thanks.

#### 24. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal\_TotalNotHispanic Row Name: Total Infants in State

Column Name: Total Not Hispanic or Latino

Year: 2006 Field Note:

Total occurrent births 27,791. Hispanic = 14,511 and Non-Hispanic = 13,280. NM Numbers checked and are correct.

#### 25. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal\_TotalHispanic Row Name: Total Infants in State Column Name: Total Hispanic or Latino

Year: 2006 Field Note:

the total for hispanic or latino is correct. 14,511

#### Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal\_Mexican Row Name: Total Infants in State

Column Name: Mexican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

#### Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal\_PuertoRican Row Name: Total Infants in State Column Name: Puerto Rican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

Programs including Medicaid reporting services do not collect this data.

Programs including Medicaid reporting services do not collect this data.

#### Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV\_TotalNotHispanic

Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2006 Field Note:

Programs do not collect the details on country or area of origin

#### 29. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV\_TotalHispanic

Row Name: Title V Served Column Name: Total Hispanic or Latino

Year: 2006 Field Note:

30. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV\_NotReported

Row Name: Title V Served

Column Name: Ethnicity Not Reported

Year: 2006 Field Note:

Section Number: II. Unduplicated Count by Ethnicity Field Name: InfantsTitleV\_Mexican

Row Name: Title V Served Column Name: Mexican

Year: 2006

Field Note:

Programs including Medicaid reporting services do not collect this data.

32. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV\_Cuban Row Name: Title V Served Column Name: Cuban

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

33. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV\_CentralAmerican

Row Name: Title V Served

Column Name: Central and South American

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

34. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV\_EthnicityOther

Row Name: Title V Served

Column Name: Other and Unknown

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

35. Section Number: II. Unduplicated Count by Ethnicity
Field Name: InfantsTitleXIX\_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect data about country or origin -Hispanic or Latino .

36. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_TotalHispanic Row Name: Eligible for Title XIX Column Name: Total Hispanic or Latino

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect data about country or origin -Hispanic or Latino .

Please fix the TVIS system so that one single entry note will explain if a state program does not collect the detail on country or area of origin of Hispanic or Latino clients. Please.

Please.

37. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_Mexican Row Name: Eligible for Title XIX Column Name: Mexican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

38. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_Cuban Row Name: Eligible for Title XIX

Column Name: Cuban

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

39. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_PuertoRican Row Name: Eligible for Title XIX Column Name: Puerto Rican

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

40. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_CentralAmerican

Row Name: Eligible for Title XIX

Column Name: Central and South American

Year: 2006 Field Note:

Programs including Medicaid reporting services do not collect this data.

## FORM 9 STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM [Secs. 505(A)(E) AND 509(A)(B)] STATE: NM

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number	800-552-8195	(800) 552-8195	(800) 552-8195	(800) 552-8195	(800) 552-8195
2. State MCH Toll-Free "Hotline" Name	Baby Net	Baby Net	Baby Net	Baby Net	Baby Net
3. Name of Contact Person for State MCH "Hotline"	Sandy Scar	Sandy Scar	Patricia Marquez	Carol Nez	Carol Nez
4. Contact Person's Telephone Number	(800)-552-8195	(800) 552-8195	(800) 552-8195	(800) 552-8195	(800) 552-8195
5. Number of calls received on the State MCH "Hotline" this reporting period	0		267	457	800

## FORM 9 STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL) [Secs. 505(A)(E) AND 509(A)(B)] STATE: NM

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
State MCH Toll-Free     "Hotline" Telephone     Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
Contact Person's     Telephone Number					
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

None

#### FIELD LEVEL NOTES

1. Section Number: Main

Field Name: calls\_2
Row Name: Number of calls received On the State MCH Hotline This reporting period

Column Name: FY Year: 2004

Field **Mote:**Toll free line is contracted with a UNM group and managed by FIT Program in Long Term Services. Needs more assessment.

#### **FORM 10** TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT **STATE PROFILE FOR FY 2006** [SEC. 506(A)(1)]

STATE: NM

#### 1. State MCH Administration:

Title V is located in the Family Health Bureau in the Public Health Division in the New Mexico Department of Health. The Title V Director is also the Bureau Chief of the Family Health Bureau. Family Health Bureau oversees: the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Family Planning, Children With Special Health Care Needs, Perinatal Case Management/Home visiting, Maternal Health, Child Health, Maternal Child Health (MCH) Epidemiology, and Part C Care Coordination. School Health, Dental Health, Childhood Injury Prevention, and Immunizations are located in other bureaus within the Public Health Division, but close coordination exists. The SECCS component is housed within the Maternal Child Health Section of the Bureau. The Family Health Bureau consists of six sections/programs, and administrative staff who oversee the implementation of preventive services to reproductive aged women, mothers, infants, children, adolescents/youth, including children and youth with special health care needs, and their families, assess the needs of this population, and generate data to influence policy decision making. The services provided range from: 1) Direct safetynet health care services to individuals; 2) Family support services such as transportation, parent to parent support, and case management, or care coordination, WIC, Commodity Supplemental Foods, and Farmer's Market, outreach, translation, and health education; 3) Population-based services, such as newborn screening, surveillance, SIDS education and counseling, and injury and violence prevention activities, a marketing campaign to increase positive birth outcomes; and 4) Capacity or infrastructure building services, such as needs assessment, evaluation, planning, policy development, quality assurance, monitoring, training, information systems, and helping in developing systems of care. Several programs fund positions in the District and Local Health Offices to implement these services. The Bureau houses a Medical Director, Bureau Chief, and support staff work collaboratively as a team to use resources strategically to meet identified needs within this population depending on their program focus.

Block Grant Funds		
2. Federal Allocation (Line 1, Form 2)	\$ 4,688,570	
3. Unobligated balance (Line 2, Form 2)	\$ 0	
4. State Funds (Line 3, Form 2)	\$ 5,512,630	
5. Local MCH Funds (Line 4, Form 2)	\$ 0	
6. Other Funds (Line 5, Form 2)	\$ 0	
7. Program Income (Line 6, Form 2)	\$ 0	
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 10,201,200	
9. Most significant providers receiving MCH funds:		UNM Department of Pediatrics  Clark Reynolds
		Sharon Thiele
		P.O.D. Inc.
10. Individuals served by the Title V Program (Col. A, Form 7)		
a. Pregnant Women	 15,760	
b. Infants < 1 year old	 27,649	
c. Children 1 to 22 years old	 28,021	
d. CSHCN	 5,765	
e. Others	24,578	

- 11. Statewide Initiatives and Partnerships:
- a. Direct Medical Care and Enabling Services:

Direct Services: 126 Multi-disciplinary pediatric specialty clinics 2,225 CYSHCN Medical Care 2,733 CYSHCN Enabling Services: Care Coordination by 48 social workers for 4,992 children with special Provision of family centered, community-based, coordinated care including care coordination services, for CYSHCN and facilitate the development of community based systems of services for such children and their families. The NM Title V CYSHCN program is fortunate in that there the provider base serves New Mexico's small population in a large state. Providers and agencies are represented by key players throughout the state, many of whom share the MCH approach to care for CYSHCN. The Title V Program works with Parents Reaching Out, EPICS and Family Voices to assure critical family involvement in decision making and training of providers and families, collaboration regarding transition of CYSHCN, cultural competence issues and ongoing efforts in the state to create a medical home climate. The Title V Program provides 128 multidisciplinary specialty clinics statewide assuring community based specialty care and oversight. District II has received CDC funding for the second year, enabling them to provide asthma clinics. The National Center for Cultural Competence assisted districts in planning for district appropriate cultural competence activities. The districts continue this work. With limited funding and increasing costs, the Title V program is now billing for care coordination (case management) for Medicaid clients receiving clinic services. The Title V program will negotiate with the Salud! MCO's to increase the breadth of funding to include more than a 2 hour billing per child.

#### b. Population-Based Services:

Newborn Hearing and Genetic Screening Programs screen 27,500 children annually. Experts from families, professions, agencies and UNM participate in the Newborn Hearing Advisory Committee and the Newborn Genetic Advisory Committee thus assuring a statewide effort to provide family-centered, culturally competent, community based, coordinated screening, follow-up and care. The Title V CYSHCN program has prepared a model for the development of a statewide council to oversee efforts to improve care in all areas. The Title V CYSHCN Program, CMS, works closely with UMM Continuum of Care, the Lend Program, Parents Reaching Out, Family Voices, the Health Systems Bureau RPHCA funded clinics, 1000 providers statewide, the NM Pediatric Society, the Medicaid/SCHIP Salud! Programs, Indian Health Services, Long Term Services Family Infant Toddler Program.

#### c. Infrastructure Building Services:

(max 2500 characters)

Surveillance of state on all children with special health care needs; advocate for support for the infrastructure. Work continues with these partners on the Family Infant Toddler Interagency Coordinating Council, the MCH Collaborative and the Healthy Transition N to meet the MCH model and to increase the participation of key players in addressing MCH initiatives. University-operated perinatal outreach clinics are located in Albuquerque at the Indian Health Service, Las Cruces (Mountain View and Memorial/First Step),

Alamogordo, Farmington, Taos, and Roswell.. These clinics are staffed by university Maternal-Fetal Medicine sub specialists (perinatologists) and provide ongoing local patient care and physician consultation. For 2002, 627 patients were seen in these clinics. The maternal transport and obstetric referral system provides access to a Maternal-Fetal Medicine sub specialist 24/7 for telephone consultations, at an average of six calls/day, and to accept the transport of patients requiring intensive management at the university, including women in preterm labor. A comprehensive outreach educational program for community-based hospitals, physicians, and staff is manned by Maternal-Fetal Medicine sub specialist physicians, diabetes educators, and clinical nurse educators who travel the state to provide training programs that help to maintain a uniform and ever improving standard of obstetrical care for New Mexicans. High-risk obstetrical programs and case presentations are presented at community hospitals, in which all health care professionals interested in maternal child health may attend. From July 2001 through June 2002, a total of 120 obstetrical outreach educational programs were presented to more than 1600 participants at no charge. All educational programs provide accredited continuing education units for nurses, midlevel providers, and physicians. The total number of maternal transports was 614 for the 02 fiscal year compared to 635 in fiscal year 03., an upward trend.

12. The primary Title V Program conta	ct person:
Name	Jane C. Peacock

<ol><li>13. The children with</li></ol>	n special health c	are needs (CSHCN	) contact person:
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Name	Jane C. Peacock	Name	Lynn Christiansen
Title	Title V Director	Title	CYSCHN Director
Address	2040 S. Pacheco, Suite 101	Address	2040 S. Pacheco, Suite 101
City	Santa Fe	City	Santa Fe
State	NM	State	NM
Zip	87505	Zip	87505
Phone	505-476-8901	Phone	505-476-8851
Fax	505-476-8959	Fax	505-476-8959
Email	Jane.Peacock@state.nm.us	Email	Lynn.Christiansen@state.nm.us
Web		Web	

FORM NOTES FOR FORM 10
None

FIELD LEVEL NOTES

None

### **FORM 11** TRACKING PERFORMANCE MEASURES [Secs 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)] STATE: NM

#### PERFORMANCE MEASURE # 01

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

2000	2001			<u>Data</u>		
	2001	2002	2003		2004	
100	100	1	100	100		100
100.0	100.0	)	100.0	100.0		100.0
20	19	1	20	21		18
20	19	1	20	21		18
			Final		Final	
	Annua	l Objective and	d Performance [	<u>Data</u>		
2005	2006	2007	2008		2009	
100	100	1	100	100		100
		above years.	Numerator, Deno	minator and	Annual Indi	icators a
	20 20 2005 100 Please fill in only th	20 19 20 19 20 20 Annual 2005 2006 100 100	20 19 20 19  Annual Objective and 2005 2006 2007 100 100  Please fill in only the Objectives for the above years.	20   19   20	20         19         20         21           20         19         20         21           Final           Annual Objective and Performance Data           2005         2006         2007         2008           100         100         100         100           Please fill in only the Objectives for the above years. Numerator, Denominator and	20   19   20   21

#### PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

		Annual O	bjective and Perfor	mance Data	
	2000	2001	2002	2003	2004
Annual Performance Objective					46 46
Annual Indicator			46		46 46
Numerator					_
Denominator					
Is the Data Provisional or Final?				Final	Final
		Annual O	biective and Perfor	mance Data	

2005 2006 2009 2007 2008 50 **Annual Performance Objective** 48 52 52 52 **Annual Indicator** 

Denominator

Numerator

PERFORMANCE MEASURE # 03						
The percent of children with special health care needs age 0 to 18 wh	o receive coordinate	ed, ongoing, compreh	nensive care within a r	nedical home. (CSHC	CN Survey)	
			Objective and Perfor			
	2000	2001	2002	2003	2004	
Annual Performance Objective				45.4	-	46
Annual Indicator			45.4	45.4	4	15.4
Numerator						
Denominator						
Is the Data Provisional or Final?				Final	Final	
		<u>Annual</u>	Objective and Perfor	mance Data		
	2005	2006	2007	2008	2009	
Annual Performance Objective	48	50	50	50		50
Numerator	not required for fut		above years. Numera	ior, Denominator and	Alliuai iliulcalui	is a
			or public insurance to	pay for the services t	hev need. (CSH0	CN
PERFORMANCE MEASURE # 04 The percent of children with special health care needs age 0 to 18 wh		dequate private and/o			hey need. (CSH0	CN
PERFORMANCE MEASURE # 04 The percent of children with special health care needs age 0 to 18 wh	ose families have ac	dequate private and/o	Objective and Perfor	mance Data		CN
PERFORMANCE MEASURE # 04 The percent of children with special health care needs age 0 to 18 wh Survey)	ose families have ac	dequate private and/o Annual o			hey need. (CSHC	
PERFORMANCE MEASURE # 04 The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective	ose families have ac	dequate private and/o	Objective and Perfor 2002	mance Data 2003 57.4	2004	60
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator	ose families have ad	dequate private and/o Annual o 2001	Objective and Perfor 2002 57.4	mance Data 2003	2004	
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator  Numerator	ose families have ad	dequate private and/o Annual o	Objective and Perfor 2002 57.4	mance Data 2003 57.4	2004	60
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator  Numerator  Denominator	ose families have ad	dequate private and/o Annual o 2001	Objective and Perfor 2002 57.4	2003 57.4 57.4	2004	60
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator	ose families have ad	dequate private and/o Annual o 2001	Objective and Perfor 2002 57.4	mance Data 2003 57.4	2004	60
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator  Numerator  Denominator	ose families have ad	dequate private and/o  Annual o  2001	Objective and Perfor 2002 57.4	mance Data 2003 57.4 57.4 Final	2004	60
PERFORMANCE MEASURE # 04 The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator  Numerator  Denominator	ose families have ad	Annual of Annual	Objective and Perfor  2002  57.4  Objective and Perfor  2007	mance Data 2003 57.4 57.4 Final	2004	60
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000 2005	dequate private and/o  Annual o  2001	Objective and Perfor 2002 57.4	### ST.4	20045	60
PERFORMANCE MEASURE # 04  The percent of children with special health care needs age 0 to 18 wh Survey)  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000  2005  62	Annual of Annual	Objective and Perfor  2002  57.4  Objective and Perfor  2007	77.4 2003 57.4 57.4 Final mance Data 2008	2004 5 Final 2009	60

PERFORMANCE MEASURE # 05									
Percent of children with special health care needs age 0 to 18 whose Survey)	families report the o	community-b	oased serv	vice systems	are orga	nized so the	y can use	e them easi	ly. (CSH
			Annual C	Objective ar	nd Perfor	mance Data	<u>a</u>		
	2000	2001		2002		2003		2004	
Annual Performance Objective	·						66.5		68
Annual Indicato	r				66.5		66.5		66.5
Numerato	r								
Denominato	r		_			·		·	
Is the Data Provisional or Final						Final		Final	
			Annual C	Objective ar	nd Perfor	mance Data	<u>a</u>		
	2005	2006		2007		2008		2009	
Annual Performance Objective	69		70		72		72		72
Annual Indicato	r								
7.111.441.1141.414									
Numerato	Please fill in only the	he Objective	es for the a	above years.	. Numerat	or, Denomir	nator and	Annual Ind	icators a
	Please fill in only the not required for fut	he Objective ure year da	es for the a ta.	above years.	. Numerat	or, Denomir	nator and	Annual Ind	icators a
Numerato	Please fill in only the not required for fut	he Objective ure year da	es for the a	above years.	. Numerat	or, Denomir	nator and	Annual Ind	icators a
Numerato Denominato	Please fill in only the not required for fut	he Objective ure year da	es for the a	above years.	. Numerat	or, Denomir	nator and	Annual Ind	icators a
Numerato Denominato PERFORMANCE MEASURE # 06	Please fill in only the not required for fut r	ure year da	ta.						icators a
Numerato Denominato PERFORMANCE MEASURE # 06	Please fill in only the not required for fut r	ure year da	ta.		cts of adu	lt life. (CSH	CN Surve		icators a
Numerato Denominato PERFORMANCE MEASURE # 06	Please fill in only the not required for fut r	ure year da	ta.	n to all aspe	cts of adu	lt life. (CSH	CN Surve		icators a
Numerato Denominato PERFORMANCE MEASURE # 06	Please fill in only the not required for fut r	sary to mak	ta.  e transition  Annual C	n to all aspe	cts of adu	lt life. (CSH	CN Surve	ey)	icators a
Numerato Denominato PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received	Please fill in only the not required for fut r	sary to mak	ta.  e transition  Annual C	n to all aspe	cts of adu	lt life. (CSH	CN Surve	ey)	
Numerato Denominato  PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective	Please fill in only the not required for fut required for	sary to mak	ta.  e transition  Annual C	n to all aspe  Dbjective ar  2002	cts of adu nd Perfor	lt life. (CSH	CN Surve <u>a</u> 5.8	ey)	5.9
Numerato Denominato  PERFORMANCE MEASURE # 06  The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato	Please fill in only the not required for fut of the services neces:	sary to mak	ta.  e transition  Annual C	n to all aspe  Dbjective ar  2002	cts of adu nd Perfor	lt life. (CSH	CN Surve <u>a</u> 5.8	ey)	5.9
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato	Please fill in only the not required for fut r  d the services necess  2000	sary to mak	ta.  e transition  Annual C	n to all aspe  Dbjective ar  2002	cts of adu nd Perfor	lt life. (CSH	CN Surve <u>a</u> 5.8	ey)	5.9
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato  Numerato  Denominato	Please fill in only the not required for fut r  d the services necess  2000	sary to mak	ta.  e transition  Annual C	n to all aspe  Dbjective ar  2002	cts of adu nd Perfor	nt life. (CSH)	CN Surve <u>a</u> 5.8	⊋y) 2004	5.9
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato  Numerato  Denominato	Please fill in only the not required for fut r  d the services necess  2000	sary to mak	ta.  e transition  Annual C	n to all aspe  Dbjective ar  2002	cts of adu	mance Date 2003  Final	CN Surve 2 5.8 5.8	⊋y) 2004	5.9
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato  Numerato  Denominato	Please fill in only the not required for fut r  d the services necess  2000	sary to mak	ta.  e transition  Annual C	n to all aspe Dbjective ar 2002	cts of adu	mance Date 2003  Final	CN Surve 2 5.8 5.8	⊋y) 2004	5.9
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato  Numerato  Denominato	Please fill in only the not required for fut required for fut red the services necession 2000	sary to mak	ta.  e transition  Annual C	n to all aspe  Dijective ar  2002	cts of adu	mance Data 2003  Final	CN Surve 2 5.8 5.8	2004 Final	5.9
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective  Annual Indicato  Numerato  Denominato  Is the Data Provisional or Final	Please fill in only the not required for fut required for fut red the services necess 2000 er required for fut required for f	sary to mak	Annual C	n to all aspe  2002  Dbjective ar  2007	cts of adund Performus 5.8	Final  mance Date  2003	5.8 5.8 5.8	2004 Final	5.9 5.8
PERFORMANCE MEASURE # 06 The percentage of youth with special health care needs who received  Annual Performance Objective Annual Indicato Numerato Denominato Is the Data Provisional or Final	Please fill in only the not required for fut of the services neces:  2000  2005  2005	sary to mak  2001  2006  he Objective	Annual C	n to all aspe  2002  Dbjective ar  2007	cts of adund Performus 5.8	Final  mance Date  2003	5.8 5.8 5.8	2004 Final	5.9 5.8

ercent of 19 to 35 month olds who have received full schedule of ag aemophilus Influenza, and Hepatitis B.	е арргорпате шши								
			Annual C	Objective an	d Perfor		<u>a</u>		
	2000	2001		2002		2003		2004	_
Annual Performance Objective			72		72		72		7.
Annual Indicator	66.6		64.5		64.6		71		7
Numerator									
Denominator									
Is the Data Provisional or Final?						Provisiona	al	Provisiona	ıl
			Annual C	Objective an	d Perfor		<u>a</u>		
Accord Burganian China's	2005	2006	7.0	2007	74	2008	74	2009	_
Annual Performance Objective	73	2006	7.3	2007	74	2008	74	2009	7
Annual Indicator	73								7
•	73 Please fill in only the	ne Objectiv	ves for the a						
Annual Indicator	Please fill in only the not required for fut	ne Objectiv	ves for the a						
Annual Indicator Numerator	Please fill in only the not required for fut	ne Objectiv	ves for the a						
Annual Indicator Numerator Denominator	Please fill in only the not required for fut	ne Objectiv	ves for the a						
Annual Indicator Numerator	Please fill in only the not required for fut	ne Objectiv	ves for the a						
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08	Please fill in only the not required for fut	ne Objectiv	ves for the a ata.		Numerat	or, Denomir	nator and		
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08	Please fill in only the not required for fut	ne Objectiv	ves for the a ata.	above years.	Numerat	or, Denomir	nator and		
Annual Indicator Numerator Denominator	Please fill in only the not required for fut	ne Objectiv ure year d	ves for the a ata.	above years.	Numerat	or, Denomir	nator and	Annual Indic	ators
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.	Please fill in only the not required for fut	ne Objectiv ure year d	ves for the a ata.	above years.	Numerat	or, Denomir	nator and	Annual Indic	ators
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.  Annual Performance Objective	Please fill in only the not required for fut 2000 44 39.1	ne Objectiv ure year d	ves for the a ata.  Annual C	above years.	Numerated Numera	or, Denomir	a 40	Annual Indic	ators
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.  Annual Performance Objective Annual Indicator	Please fill in only the not required for fut.  2000  44  39.1  1,697	ne Objectiv ure year d	Annual C	Objective an	Numerat d Perfor 43 37.7	or, Denomir	40 35.9	Annual Indic	4 36. 1,58
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.  Annual Performance Objective Annual Indicator Numerator	73 Please fill in only the not required for fut  2000 44 39.1 1,697 43,438	ne Objectiv ure year d	Annual C  44  37.5  1,647	Objective an	d Perfor 43 37.7 1,635	or, Denomir	40 35.9 1,556	Annual Indic	4 36 1,58 43,29
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.  Annual Performance Objective Annual Indicator Numerator Denominator	73 Please fill in only the not required for fut  2000 44 39.1 1,697 43,438	ne Objectiv ure year d	Annual C  44  37.5  1,647	Objective an	d Perfor 43 37.7 1,635	mance Data 2003	40 35.9 1,556	Annual Indic	4 36 1,58 43,29
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.  Annual Performance Objective Annual Indicator Numerator Denominator	73 Please fill in only the not required for fut  2000 44 39.1 1,697 43,438	ne Objectiv ure year d	Annual C  44  37.5  1,647  43,973	Objective an	d Perfor 43 37.7 1,635 43,406	mance Data 2003	40 35.9 1,556 43,291	Annual Indic	4 36 1,58 43,29
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 08 e rate of birth (per 1,000) for teenagers aged 15 through 17 years.  Annual Performance Objective Annual Indicator Numerator Denominator	73 Please fill in only the not required for fut  2000 44 39.1 1,697 43,438	ne Objectiv ure year d	Annual C  44  37.5  1,647  43,973	Objective an	d Perfor 43 37.7 1,635 43,406	mance Data 2003	40 35.9 1,556 43,291	Annual Indic	4 36 1,58 43,29

RFORMANCE MEASURE # 09 received protective sealants	on at least one pe	rmanent m	olar tooth.						
			Annual (	Objective an	d Perfor	mance Data	<u>a</u>		
	2000	2001		2002		2003		2004	
Annual Performance Objective	40		41		42		43		4
Annual Indicator	41.3		44		48		48		4
Numerator									
Denominator									
Is the Data Provisional or Final?					_	Provision	al	Provisiona	al
			Annual (	Objective an	d Porfor	manco Date	•		
	2005	2006	Ailliuai	2007	u renoi	2008	<u>a</u>	2009	
Annual Performance Objective Annual Indicator	Diagon fill in only	Obi 4:	48	ahove vears	50 Numerat	tor Denomi	50	Annual India	
Annual Indicator Numerator Denominator	Please fill in only not required for fu	the Objecti ture year d	ves for the a			tor, Denomii		Annual Indic	
Annual Indicator Numerator	Please fill in only not required for fu	the Objecti ture year d	ves for the a lata.		Numera		nator and	Annual Indio	
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10 e rate of deaths to children aged 14 years and younger caused by	Please fill in only not required for function with the control of	the Objective year despersion of the Objection of the Obj	ves for the a lata. 0,000 childre	en.	Numerat		nator and	Annual India	cators
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10 rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective	Please fill in only not required for function vehicle crast 2000	the Objective year dominate of the Objection of the Objec	ves for the a lata. 0,000 childre Annual 0	en. Objective an	Numera	mance Data	nator and		cators
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10 rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective Annual Indicator	Please fill in only not required for furnotor vehicle crast 2000 8.5	nes per 100	ves for the a lata.  0,000 childre  Annual 6  5.5	en. Objective an	Numerat	mance Data	nator and		cators 5
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10  rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective Annual Indicator	Please fill in only not required for function vehicle crast 2000	nes per 100	ves for the a lata.  0,000 childre  Annual 6  5.5	en. Objective an	d Perfor	mance Data	nator and		5.
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10  rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective Annual Indicator Numerator	Please fill in only not required for furnotor vehicle crast 2000 8.5	the Objective year description of the Objective ture year	0,000 childre  Annual 6  5.5  25	en. Objective an 2002	d Perfor	mance Data 2003	a 5.5 6.3	2004	5.
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10  rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective Annual Indicator Numerator	Please fill in only not required for function vehicle crash 2000 8.5 6.0 25 419,108	the Objective year description of the Objective ture year	0,000 childre  Annual 6  5.5  25	en. Objective an 2002	d <b>Perfor</b> 6  7.0  29	mance Data 2003	5.5 6.3 26	2004	5. 7. 3
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10  e rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective Annual Indicator Numerator Denominator	Please fill in only not required for function vehicle crash 2000 8.5 6.0 25 419,108	the Objective year description of the Objective ture year	0,000 childre  Annual 6  5.5  25  454,523	en. Objective an 2002	d Perfor  6  7.0  29  11,531	mance Data 2003	5.5 6.3 26 411,531	2004	5. 7. 3
Annual Indicator Numerator Denominator  RFORMANCE MEASURE # 10  e rate of deaths to children aged 14 years and younger caused by  Annual Performance Objective Annual Indicator Numerator Denominator	Please fill in only not required for function vehicle crass 2000  8.5 6.0 25 419,108	nes per 100 2001	0,000 childre  Annual 6  5.5  25  454,523	en.  2002  4	d Perfor  6  7.0  29  11,531	mance Data 2003	5.5 6.3 26 411,531	2004	5. 7. 3

PERFORMANCE MEASURE # 11							
Percentage of mothers who breastfeed their infants at hospital discha-	rge.						
				tive and Perfor		0004	
Amusal Parformance Objective	<b>2000</b> 75	2001	75.5	<b>02</b> 76	2003	<b>2004</b> 30	. 81
Annual Performance Objective						_	
	81.2	<u> </u>	80.1	79		33	8:
Numerator	·						
Denominator							
Is the Data Provisional or Final?					Provisional	Provi	isional
		۸۳	nual Objec	tive and Perfor	manca Data		
	2005	2006	20		2008	2009	
Annual Performance Objective	83		83	83	8	34	8
Annual Indicator							
	Diagon fill in only th	ne Objectives fo	or the above	years. Numera	tor, Denominator	and Annual	Indicators
Numerator Denominator	Please fill in only the not required for future.	ne Objectives foure year data.	or the above	e years. Numera	tor, Denominator :	and Annual	Indicators
Numerator Denominator PERFORMANCE MEASURE # 12	Please fill in only the not required for futured for f	ure year data. Ar	nual Objec	ctive and Perfor	mance Data		
Numerator Denominator  PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before	Please fill in only the not required for futured for f	ure year data.	nual Objec 20	etive and Perfor	mance Data 2003	2004	
Numerator Denominator  ERFORMANCE MEASURE # 12 ercentage of newborns who have been screened for hearing before  Annual Performance Objective	hospital discharge.	ure year data. Ar	nual Objec 20	ctive and Perfor 02	mance Data 2003	<b>2004</b> .5	. 9
Numerator Denominator  ERFORMANCE MEASURE # 12 ercentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator	hospital discharge.  2000  99  98.7	Ar 2001	99.9	etive and Perfor 02 99 91.8	mance Data 2003 94	<b>2004</b> .5	92.
Numerator  PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator	hospital discharge.  2000  99  98.7	Ar 2001	99 99.9 97.751	99 91.8 25,311	mance Data 2003 94 92 25,13	2004 .5 .0	9 92 25,56
PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator  Denominator	hospital discharge.  2000  99  98.7  26,460  26,813	Ar 2001	99.9	etive and Perfor 02 99 91.8	mance Data 2003  94  92  25,13	2004 .5 .0	92 92 25,56 27,79
Numerator  PERFORMANCE MEASURE # 12  Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator	hospital discharge.  2000  99  98.7  26,460  26,813	Ar 2001	99 99.9 97.751	99 91.8 25,311	mance Data 2003 94 92 25,13	2004 .5 .0	9 92 25,56
PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator  Denominator	hospital discharge.  2000  99  98.7  26,460  26,813	2001 26	99 99.9 95,751	99 91.8 25,311 27,573	mance Data 2003  94  92  25,13  27,32  Provisional	2004 .5 .0	92 92 25,56 27,79
PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator  Denominator	hospital discharge.  2000  99  98.7  26,460  26,813	2001 26	99 99.9 95,751	99 91.8 25,311 27,573	mance Data 2003  94  92  25,13  27,32  Provisional	2004 .5 .0	9 92. 25,56 27,79 isional
PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator  Denominator	Please fill in only the not required for future to require for future to the not required for	Ar 2001	99 99.9 5,751 5,791	99 91.8 25,311 27,573	mance Data 2003  94  92  25,13  27,33  Provisional  mance Data 2008	2004 .5 .0 .0 36 22	92. 25,56 27,79 isional
PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	hospital discharge.  2000  99  98.7  26,460  26,813	2001 Ar 2006	99 99.9 5,751 5,791 cmual Object 200 95.7	99 91.8 25,311 27,573 ctive and Perfor	mance Data 2003  94  92  25,13  27,32  Provisional  mance Data 2008	2004 .5 .0 .0	92 25,56 27,79 isional
PERFORMANCE MEASURE # 12 Percentage of newborns who have been screened for hearing before  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?  Annual Performance Objective  Annual Indicator	Please fill in only the not required for future to the not req	2001 Ar 2006	99 99.9 5,751 5,791 cmual Object 200 95.7	99 91.8 25,311 27,573 ctive and Perfor	mance Data 2003  94  92  25,13  27,32  Provisional  mance Data 2008	2004 .5 .0 .0	92 25,56 27,79 isional

Denominator

PERFORMANCE MEASURE # 13					
Percent of children without health insurance.					
			al Objective and Perfo		
	2000	2001	2002	2003	2004
Annual Performance Objective			20 20	18	18
Annual Indicator			18 18	9.6	9.0
Numerator	153,355				
Denominator	553,628		_		
Is the Data Provisional or Final?				Final	Provisional
	2005	<u>Annւ</u> 2006	al Objective and Perfo 2007	rmance Data 2008	2009
Annual Performance Objective			10 10		2003
Annual i enormance objective					
Annual Indicator					
Annual Indicator	Diagon fill in only th	ne Objectives for t	he above years. Numera	ator, Denominator and	Annual Indicators
Numerator Denominator	Please fill in only the not required for fut	ne Objectives for t ure year data.	he above years. Numera	ator, Denominator and	Annual Indicators
Numerator Denominator PERFORMANCE MEASURE # 14	Please fill in only the not required for fut	ure year data.  Medicaid Program	,		Annual Indicators
Numerator Denominator ERFORMANCE MEASURE # 14	Please fill in only the not required for fut	ure year data.  Medicaid Program			Annual Indicators
Numerator Denominator ERFORMANCE MEASURE # 14	Please fill in only the not required for fut service paid by the l	ure year data.  Medicaid Program  Annu 2001	al Objective and Perfo	rmance Data	2004
Numerator  Denominator  ERFORMANCE MEASURE # 14  ercent of potentially Medicaid-eligible children who have received a	Please fill in only the not required for fut service paid by the lace 2000	ure year data.  Medicaid Program  Annu  2001	al Objective and Perfo 2002	rmance Data 2003	2004
Numerator Denominator  ERFORMANCE MEASURE # 14 ercent of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of the	Please fill in only the not required for fut service paid by the lace 2000	Medicaid Program  2001	. al Objective and Perfo 2002 60 61 .8 68.8	rmance Data 2003 75	<b>2004</b> 7 80.
Numerator  Denominator  ERFORMANCE MEASURE # 14  ercent of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potential who have received a second	Please fill in only the not required for fut service paid by the lace 2000 77.	Medicaid Program  2001  77  263,62	. al Objective and Perfo 2002 60 61 .8 68.8 25 249,770	rmance Data 2003 75 79.7	2004 7 80. 272,89
Numerator  Denominator  ERFORMANCE MEASURE # 14  ercent of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potential who have received a second	Please fill in only the not required for fut service paid by the leave to the leave	Medicaid Program  2001  77  263,62	. al Objective and Perfo 2002 60 61 .8 68.8 25 249,770	rmance Data 2003  75  79.7  269,487	
PERFORMANCE MEASURE # 14 ercent of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potential who have r	Please fill in only the not required for fut service paid by the leave to the leave	Medicaid Program  2001  77  263,63  338,9	. sal Objective and Performance 2002 60 61 .8 68.8 .25 249,770 .15 363,169	75 79.7 269,487 338,146 Final	2004 7 80. 272,89 338,48
PERFORMANCE MEASURE # 14 ercent of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially Medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potentially medicaid-eligible children who have received a second of potential who have r	Please fill in only the not required for fut service paid by the leave paid by the l	Medicaid Program  2001  77  263,63  338,9	. (al Objective and Performance 2002)  60 61  .8 68.8  .25 249,770  .15 363,169	rmance Data 2003  75  79.7  269,487  338,146  Final	2004 7 80. 272,89 338,48 Provisional
PERFORMANCE MEASURE # 14 Percent of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potential service of p	Please fill in only the not required for fut service paid by the leave to the leave	Medicaid Program  2001  77  263,63  338,9	10	75 79.7 269,487 338,146 Final  rmance Data 2008	2004 7 80. 272,89 338,48 Provisional
PERFORMANCE MEASURE # 14 Percent of potentially Medicaid-eligible children who have received a secretary of potentially Medicaid-eligible children who have received a secretary of potentially Medicaid-eligible children who have received a secretary of potentially defined and performance Objective of the Data Provisional or Final?  Annual Performance Objective	Please fill in only the not required for fut not required for fut service paid by the leave to t	Medicaid Program  2001  77  263,63  338,9	. (al Objective and Perfo 2002 60 61 .8 68.8 25 249,770 15 363,169	rmance Data 2003  75  79.7  269,487  338,146  Final	2004 7 80. 272,89 338,48 Provisional
PERFORMANCE MEASURE # 14 Percent of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially Medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potentially medicaid-eligible children who have received a service of potential service of potentia	Please fill in only the not required for fut not required for fut service paid by the leaves and the service paid by the service paid by the leaves and the service paid by the leaves and the service paid by the service pa	Medicaid Program  Annu 2001  77  263,6: 338,9  Annu 2006	10	rmance Data 2003  75  79.7  269,487  338,146  Final  rmance Data 2008  80	2004 7 80. 272,89 338,48 Provisional

Denominator

PERFORMANCE MEASURE # 15					
he percent of very low birth weight infants among all live births.					
		<u>Annual</u>	Objective and Perfor		
	2000	2001	2002	2003	2004
Annual Performance Objective	1	1	1	1	
Annual Indicator	1.3	1.1	1.3	1.1	1.
Numerator	357	301	347	319	30
Denominator	27,206	27,101	27,708	27,799	27,37
Is the Data Provisional or Final?				Final	Provisional
		Annual	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	1	1	1	1	
Annual Indicator					
Numerator	Please fill in only th	ne Objectives for the	ahovo voare Numora		
Numerator	not required for futi	ura vaar data	above years. Numera	tor, Denominator and	Annual Indicators
Denominator	not required for futu	ure year data.	above years. Numera	tor, Denominator and	Annual Indicators
ERFORMANCE MEASURE # 16 he rate (per 100,000) of suicide deaths among youths aged 15 through	not required for futu gh 19.	ure year data. Annual	Objective and Perfor	mance Data	
ERFORMANCE MEASURE # 16 le rate (per 100,000) of suicide deaths among youths aged 15 through	gh 19.	Annual	Objective and Perfor 2002	mance Data 2003	2004
ERFORMANCE MEASURE # 16	gh 19.	ure year data. Annual	Objective and Perfor	mance Data	2004
ERFORMANCE MEASURE # 16 le rate (per 100,000) of suicide deaths among youths aged 15 through	gh 19.  2000  14  18.5	Annual	Objective and Perfor 2002	mance Data 2003	<b>2004</b>
ERFORMANCE MEASURE # 16 The rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000).  Annual Performance Objective Annual Indicator Numerator	gh 19.  2000  14  18.5  27	Annual 2001	Objective and Perfor 2002 13.5	mance Data 2003 13.5	2004 13 23
ERFORMANCE MEASURE # 16 The rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000).  Annual Performance Objective Annual Indicator Numerator	gh 19.  2000  14  18.5	Annual 2001 13.5	Objective and Perfor 2002 13.5 14.8 22	mance Data 2003 13.5 11.8	2004 13 23
ERFORMANCE MEASURE # 16 e rate (per 100,000) of suicide deaths among youths aged 15 throu  Annual Performance Objective  Annual Indicator  Numerator	gh 19.  2000  14  18.5  27  145,751	Annual 2001 13.5 14.0 20	Objective and Perfor 2002 13.5 14.8 22	mance Data 2003  13.5  11.8  18	
ERFORMANCE MEASURE # 16 le rate (per 100,000) of suicide deaths among youths aged 15 through the age of the suicide deaths among youths aged 15 through the suicide deaths among youth	gh 19.  2000  14  18.5  27  145,751	Annual 2001 13.5 14.0 20 143,344	Objective and Perfor 2002 13.5 14.8 22	13.5 11.8 18 152,308 Final	2004 13. 23. 3 152,30 Provisional
ERFORMANCE MEASURE # 16 The rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15	gh 19.  2000  14  18.5  27  145,751	Annual 2001 13.5 14.0 20 143,344 Annual 2006	Objective and Perfor 2002  13.5  14.8  22  148,644  Objective and Perfor 2007	13.5 11.8 18 152,308 Final Tmance Data 2008	2004 13. 23. 3. 152,30 Provisional
ERFORMANCE MEASURE # 16  ne rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15 through the rate (per 100,000) of suicide deaths among youths aged 15	gh 19.  2000  14  18.5  27  145,751  2005	Annual 2001 13.5 14.0 20 143,344	Objective and Perfor 2002  13.5  14.8  22  148,644  Objective and Perfor 2007	13.5 11.8 18 152,308 Final	2004 13. 23. 3 152,30 Provisional
ERFORMANCE MEASURE # 16 ne rate (per 100,000) of suicide deaths among youths aged 15 through Annual Performance Objective Annual Indicator Numerator Denominator Is the Data Provisional or Final?  Annual Performance Objective Annual Indicator	gh 19.  2000  14  18.5  27  145,751  2005	Annual 2001 13.5 14.0 20 143,344 Annual 2006 13	Objective and Perfor 2002  13.5  14.8  22  148,644  Objective and Perfor 2007	13.5 11.8 152,308 Final	2004 13 23 152,30 Provisional

Denominator

PERFORMANCE MEASURE # 17								
ercent of very low birth weight infants delivered at facilities for high-r	isk deliveries and ne	eonates.						
	2000	2001	Annual C	Objective and Perfor 2002	mance Data	<u>a</u>	2004	
Annual Performance Objective		2001	70	71	2003	70	2004	70
Annual Indicator			60.1	70.6		69.3		77.0
Numerator			181	245		221		23
			301	347		319		30
Denominator Is the Data Provisional or Final?			301	347	Final	319	Provisiona	
is the Data Provisional of Pilial:					Tillai		i iovisiona	
			Annual C	Objective and Perfor	mance Data	a		
	2005	2006		2007	2008		2009	
Annual Performance Objective	70		70	70		70		7
Annual Indicator								
Annual Indicator Numerator		ne Objective	es for the a	above years. Numera	tor, Denomi	nator and	Annual Indic	ators
	Please fill in only the not required for futi	ne Objective ure year da	es for the a	above years. Numera	tor, Denomii	nator and	Annual Indic	ators
Numerator Denominator  RFORMANCE MEASURE # 18	Please fill in only the not required for future.	ure year da	ata.	bove years. Numera			Annual Indic	ators
Numerator Denominator	Please fill in only the not required for future.	ure year da	ata.				Annual Indic	ators
Numerator Denominator RFORMANCE MEASURE # 18	Please fill in only the not required for futured for futured for futured for futured fill in the first true community and the community and the first true community and the first true commun	ure year da	ata.	Objective and Perfor	mance Dat			
Numerator  Denominator  RFORMANCE MEASURE # 18  cent of infants born to pregnant women receiving prenatal care be	Please fill in only the not required for futured for futured for futured for futured fill in the first transport for futured for future fill in the first transport fill in the	ure year da imester. 2001	Annual C	Objective and Perfor	mance Data	<u>a</u>		7
RFORMANCE MEASURE # 18 cent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective	Please fill in only the not required for futured for futured for futured for futured fill in the first transport for futured for future fill in the first transport fill in the	ure year da imester. 2001	Annual C	Objective and Perfor 2002 71	mance Data	<b>a</b> 71	2004	7 65.
Numerator Denominator  RFORMANCE MEASURE # 18 cent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator	Please fill in only the not required for future ginning in the first tree 2000	ure year da imester. 2001	Annual C 70 65.5	2002 71 66.0	mance Data	<b>a</b> 71 65.5	2004	7 65. 17,98
Numerator  Denominator  RFORMANCE MEASURE # 18  recent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator  Numerator	Please fill in only the not required for future for future fill in only the not required for future fill fill fill fill fill fill fill fil	ure year da imester. 2001	Annual C 70 65.5 17,741	2002 71 66.0 18,293	mance Data	2 71 65.5 18,219	2004	7 65. 17,98 27,37
RFORMANCE MEASURE # 18 recent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator  Numerator  Denominator	Please fill in only the not required for future for future fill in only the not required for future fill fill fill fill fill fill fill fil	ure year da imester. 2001	Annual C 70 65.5 17,741	2002 71 66.0 18,293	mance Data 2003	2 71 65.5 18,219	2004	7 65. 17,98 27,37
RFORMANCE MEASURE # 18 recent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator  Numerator  Denominator	Please fill in only the not required for future for future fill in only the not required for future fill fill fill fill fill fill fill fil	imester.	70 65.5 17,741 27,101	2002  71  66.0  18,293  27,708	mance Data 2003  Final	71 65.5 18,219 27,799	2004 Provisiona	7 65. 17,98 27,37
REFORMANCE MEASURE # 18 recent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	Please fill in only the not required for future of the required for future	ure year da imester. 2001	70 65.5 17,741 27,101	2002  71  66.0  18,293  27,708  Objective and Performance 2007	mance Date 2003  Final	71 65.5 18,219 27,799	2004	7 65. 17,98 27,37
Rumerator Denominator  ERFORMANCE MEASURE # 18  Percent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	Please fill in only the not required for future of the first tree	imester.	70 65.5 17,741 27,101	2002  71  66.0  18,293  27,708	mance Data 2003  Final	71 65.5 18,219 27,799	2004 Provisiona	7 65. 17,98 27,37
Rumerator Denominator  ERFORMANCE MEASURE # 18  ercent of infants born to pregnant women receiving prenatal care be  Annual Performance Objective  Annual Indicator  Denominator  Is the Data Provisional or Final?  Annual Performance Objective  Annual Indicator	Please fill in only the not required for future of required for future of the first tree of the first	imester. 2001 2006	Annual C 70 65.5 17,741 27,101  Annual C	2002  71  66.0  18,293  27,708  Objective and Performance 2007	Final  2008	2 71 65.5 18,219 27,799	2004 Provisiona 2009	65 17,98 27,37

STATE PERFORMANCE MEASURE # 19								
he number of 33 counties adopting the conceptual framework of Hea	althy Youth/Healthy	Communiti	ŭ				en working with	ı you
	2000	2001	Annual C	Objective and Perf 2002	ormance Dat 2003	<u>:a</u>	2004	
Annual Performance Objective		2001	66%	73%		75	2004	75
•				0.5		0.8		0.
	0.5							1
	18					26		
Denominator	33		33	33	-	33		3
Is the Data Provisional or Final?					Final		Provisional	
			Ammunal	Objective and Bert	Dot	_		
	2005	2006	Annuar	Objective and Perf 2007	2008	<u>.d</u>	2009	
Annual Performance Objective	80		80	80		80		
Annual Indicator								
N	Please fill in only th	ne Objectiv	es for the a	above years. Nume	rator, Denomi	nator and	Annual Indica	ors
Numerator	not required for fut						/ IIII I dai II laica	
	not required for fut	ure year da	ata.	-			7 iii iaai ii ialea	
Denominator	not required for fut	ure year da	ata.	•			7 maar malea	
Denominator	not required for fut	ure year da	ata.				7 madi malod	
Denominator	Tiot required for fut	ure year da	ata.				7 mindai maida	
TATE PERFORMANCE MEASURE # 20				programs			7 till dal malea	
TATE PERFORMANCE MEASURE # 20			ng/support	programs  Dijective and Perf	ormance Dat		7 till da malea	
TATE PERFORMANCE MEASURE # 20 recent of first newborns/moms receiving support services/parenting	through community		ng/support		ormance Dat 2003		2004	
ATE PERFORMANCE MEASURE # 20	through community	home visiti	ng/support	Dbjective and Perf	2003			
ATE PERFORMANCE MEASURE # 20 recent of first newborns/moms receiving support services/parenting	2000	home visitii	ng/support  Annual C	Dbjective and Perf	2003	<u>a</u>		2
ATE PERFORMANCE MEASURE # 20 recent of first newborns/moms receiving support services/parenting	through community  2000  14  26	home visitii	ing/support  Annual C  16  26	2002 18	2003	<b>a</b> 26		2
TATE PERFORMANCE MEASURE # 20  recent of first newborns/moms receiving support services/parenting and annual Performance Objective  Annual Indicator	through community  2000  14  26	home visiti	ng/support Annual C  16 26	Dbjective and Perf	2003	<b>a</b> 26		2
ATE PERFORMANCE MEASURE # 20 recent of first newborns/moms receiving support services/parenting  Annual Performance Objective  Annual Indicator  Numerator	2000 14	home visiti	ng/support Annual C  16 26	2002 18	2003	<b>a</b> 26		2
ATE PERFORMANCE MEASURE # 20 recent of first newborns/moms receiving support services/parenting  Annual Performance Objective  Annual Indicator  Numerator  Denominator	through community  2000  14  26	home visiti	ng/support Annual C  16 26	2002 18	2003	<b>a</b> 26	2004	2
TATE PERFORMANCE MEASURE # 20  recent of first newborns/moms receiving support services/parenting and annual Performance Objective  Annual Indicator  Numerator  Denominator	through community  2000  14  26	home visiti	ng/support Annual C 16 26	2002 18	2003 Final	26 9.7	2004	2
TATE PERFORMANCE MEASURE # 20  recent of first newborns/moms receiving support services/parenting and annual Performance Objective  Annual Indicator  Numerator  Denominator	through community  2000  14  26	home visiti	ng/support Annual C 16 26	Objective and Perf 2002 18 11.7	2003 Final	26 9.7	2004	2
TATE PERFORMANCE MEASURE # 20 recent of first newborns/moms receiving support services/parenting  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 14 26 2005	2001	ng/support Annual C 16 26	Dbjective and Perf 2002  18 11.7	Final  prmance Date 2008	26 9.7	2004 Provisional	9.
TATE PERFORMANCE MEASURE # 20 ercent of first newborns/moms receiving support services/parenting of Annual Performance Objective Annual Indicator Denominator Is the Data Provisional or Final?  Annual Performance Objective Annual Indicator	2000 14 26 2005 9.7	2001 2006	ng/support Annual C  16 26  Annual C	Dbjective and Perf  2002  18  11.7  Dbjective and Perf  2007	Final  prmance Date 2008	26 9.7	2004 Provisional 2009	9.
TATE PERFORMANCE MEASURE # 20 ercent of first newborns/moms receiving support services/parenting  Annual Performance Objective  Annual Indicator  Denominator  Is the Data Provisional or Final?  Annual Performance Objective  Annual Indicator	2000 14 26 2005 9.7	2001 2006	ng/support Annual C  16 26  Annual C	Dbjective and Perf	Final  prmance Date 2008	26 9.7	2004 Provisional 2009	9

STATE PERFORMANCE MEASURE # 21					
educe unintended pregnancy in New Mexico to less than 30% of birt	hs				
			Objective and Perfor		
	2000	2001	2002	2003	2004
Annual Performance Objective		45	45	43	42.5
Annual Indicator	43.6	42.2	42.2	42.2	4
Numerator					
Denominator					
Is the Data Provisional or Final?					Final
	2005		Objective and Perfor		2000
	2005	2006	<b>2007</b> 42	2008	2009
Annual Performance Objective	42.5	42.5	42	42	
Annual Indicator	Diagon fill in only th	o Objectives for the	shove veers Numero	tor Donominator and	Annual Indicators
Numerator	not required for futu	ie Objectives for the a	above years. Numera	tor, Denominator and	Annual Indicators
Denominator	not required for fatt	ure year data.			
Denominator	not required for fatt	ure year data.			
Denominator	Tiot required for fact	ure year data.			
TATE PERFORMANCE MEASURE # 22			percent of children pr	esent at a domestic v	iolence scene.
TATE PERFORMANCE MEASURE # 22	stic or sexual violen	ce) as expressed by	Dbjective and Perfor	mance Data	
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome	stic or sexual violen	ce) as expressed by Annual C 2001	Objective and Perfor 2002	mance Data 2003	2004
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome	stic or sexual violen 2000	ce) as expressed by Annual C	Dbjective and Perfor	mance Data	2004
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome	stic or sexual violen	ce) as expressed by Annual C	Objective and Perfor 2002	mance Data 2003	<b>2004</b>
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome	stic or sexual violen  2000  15  16.09	ce) as expressed by Annual C	2002 14	<u>mance Data</u> 2003	<b>2004</b>
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome:  Annual Performance Objective  Annual Indicator	2000 15	ce) as expressed by Annual C 2001  15  14%	2002 14	<u>mance Data</u> 2003	<b>2004</b>
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome  Annual Performance Objective  Annual Indicator  Numerator	2000 15	ce) as expressed by Annual C 2001  15  14%	2002 14	<u>mance Data</u> 2003	2004
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome:  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 15	ce) as expressed by Annual C 2001  15  14%	2002 14	2003 14 14	1
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome:  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 15 16.09	ce) as expressed by Annual C 2001  15  14%	Dbjective and Perfor 2002  14  14  14  Dbjective and Perfor	rmance Data 2003  14  14  Final	2004 1: 1.
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome:  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 15	2001 15 14% Annual C	Dbjective and Perfor 2002  14  14  Dbjective and Perfor 2007	mance Data 2003  14  14  Final	1
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome:  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 15 16.09 2005	ce) as expressed by Annual C 2001  15  14%	Dbjective and Perfor 2002  14  14  14  Dbjective and Perfor	rmance Data 2003  14  14  Final	2004 1 1.
TATE PERFORMANCE MEASURE # 22 educe the number of children witnessing violence (exposed to dome  Annual Performance Objective  Annual Indicator  Denominator  Is the Data Provisional or Final?  Annual Performance Objective  Annual Indicator	2000 15 16.09 2005 13	Annual C 2001  15  14%  Annual C 2006	Dbjective and Perfor 2002  14  14  Dbjective and Perfor 2007	Final  Timance Data  2003  14  14  Final  Timance Data 2008  13	2004 Final 2009
Annual Performance Objective  Annual Performance Objective  Annual Indicator  Denominator  Is the Data Provisional or Final?	2000 15 16.09 2005 13	Annual C  2001  15  14%  Annual C  2006  13  13  14 Objectives for the a	Dbjective and Perfor 2002  14  14  Dbjective and Perfor 2007	Final  Timance Data 2008	2004 Final 2009

ew Mexico's Pregnancy Risk Assessment And Monitoring System (F	RAMS)				
			Objective and Perfor		
	2000	2001	2002	2003	2004
Annual Performance Objective		6	6	7	
Annual Indicator	6	7	7	7	· ·
Numerator	6	7	7	7	
Denominator	7	7	7	7	
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	7	7	7	7	
Denominator	not required for futi	ure year data.	acere yearer rumera	ior, Borioniniator ar	a / IIII dai malcatoro
TTE PERFORMANCE MEASURE # 24		ure year data.			
ATE PERFORMANCE MEASURE # 24		ure year data.	Dbjective and Perfor		d Annual Indicators
ATE PERFORMANCE MEASURE # 24  state Title V program has a coordinated program of maternal, feta	al, infant and child do	eath review  Annual C		mance Data 2003	2004
ATE PERFORMANCE MEASURE # 24 state Title V program has a coordinated program of maternal, feta	al, infant and child do	eath review  Annual C  2001	Objective and Perfor 2002 4	mance Data	2004
ATE PERFORMANCE MEASURE # 24  state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator	al, infant and child do	eath review Annual C 2001	Objective and Perfor 2002 4	mance Data 2003	2004
ATE PERFORMANCE MEASURE # 24  state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator	al, infant and child do	eath review Annual C 2001	Objective and Perfor 2002	mance Data 2003	2004
ATE PERFORMANCE MEASURE # 24 e state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator  Numerator	al, infant and child do	eath review  Annual C  2001  4	Objective and Perfor 2002	mance Data 2003	2004
ATE PERFORMANCE MEASURE # 24  state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator  Numerator	2000 4	eath review  Annual C  2001  4	Objective and Perfor 2002	mance Data 2003	2004
ATE PERFORMANCE MEASURE # 24 e state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 4	eath review  Annual C  2001  4  3 4	Objective and Perfor 2002	mance Data 2003  3  4  Final	2004
ATE PERFORMANCE MEASURE # 24 e state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 4	eath review  Annual C  2001  4  3 4	Objective and Perfor 2002  4  3 4	mance Data 2003  3  4  Final	2004
EATE PERFORMANCE MEASURE # 24 e state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 4 2005	eath review  Annual C  2001  4  3  4  Annual C	Objective and Perfor 2002  4  3  4  Dbjective and Perfor	mance Data 2003  3  4  Final	2004 Final
TATE PERFORMANCE MEASURE # 24 e state Title V program has a coordinated program of maternal, feta  Annual Performance Objective  Annual Indicator  Denominator  Is the Data Provisional or Final?  Annual Performance Objective  Annual Indicator	2000 4 2000 4 2005 2	eath review  Annual C  2001  4  Annual C  2006	Objective and Perfor 2002  4  3  4  Objective and Perfor 2007	mance Data 2003  3 4 Final  mance Data 2008	2004 Final

STATE PERFORMANCE MEASURE # 25 The state has a program for Birth Defects Prevention and Surveillance	•				
The state flas a program for birth beleats i revention and Garvemano.	,	Annual	Objective and Barter		
	2000	2001	Objective and Perfor 2002	2003	2004
Annual Performance Objective		8			4
				-	-
	5			-	3
	8	8	8	-	<u> </u>
Is the Data Provisional or Final?				Final	Final
		Annual	Objective and Perfor	mance Data	
	2005	2006	2007	2008	2009
Annual Performance Objective	3				
Annual Indicator					
Numerator	Please fill in only th	ne Objectives for the	above years. Numera	tor, Denominator a	nd Annual Indicators
Denominator	not required for futi	ne Objectives for the ure year data.	above years. Numera	tor, Denominator a	nd Annual Indicators
TATE PERFORMANCE MEASURE # 26	not required for futi	ure year data.	Objective and Perfor		nd Annual Indicators
ATE PERFORMANCE MEASURE # 26 e Prevalence of Childhood Overweight & Obesity	not required for futu	ure year data.  Annual 2001	Objective and Perfor 2002	mance Data	2004
ATE PERFORMANCE MEASURE # 26 Prevalence of Childhood Overweight & Obesity  Annual Performance Objective	not required for future and the second secon	ure year data.  Annual 2001	Objective and Perfor 2002	mance Data 2003	2004
FATE PERFORMANCE MEASURE # 26 e Prevalence of Childhood Overweight & Obesity  Annual Performance Objective	2000 10 9.7	Annual 2001 10.1	Objective and Perfor 2002	mance Data 2003	<b>2004</b>
FATE PERFORMANCE MEASURE # 26 e Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator	2000 10 9.7	Annual 2001 10.1	Objective and Perfor           2002           10           10	mance Data 2003	<b>2004</b>
CATE PERFORMANCE MEASURE # 26 e Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator  Numerator	2000 10 9.7	Annual 2001 10.1	Objective and Perfor           2002           10           10	mance Data 2003	<b>2004</b>
rate Performance Measure # 26 e Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 10 9.7	Annual 2001 10.1	Objective and Perfor 2002	2003  10  Provisional	2004 0 1
ATE PERFORMANCE MEASURE # 26 e Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 10 9.7	Annual 2001 10.1 Annual	Objective and Perfor 2002 10 10	Provisional	2004 0 1 0 1 Provisional
ATE PERFORMANCE MEASURE # 26 e Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000 10 9.7 2005	Annual 2001 10.1 Annual 2006	Objective and Perfor 2002  10 10 0bjective and Perfor 2007	Provisional  Tmance Data  2003  10  Provisional	2004 0 1 0 1 Provisional 2009
TATE PERFORMANCE MEASURE # 26 ne Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000 10 9.7 2005	Annual 2001 10.1 Annual	Objective and Perfor 2002  10 10 0bjective and Perfor 2007	Provisional	2004 0 1 Provisional 2009
TATE PERFORMANCE MEASURE # 26  The Prevalence of Childhood Overweight & Obesity  Annual Performance Objective  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?  Annual Performance Objective  Annual Indicator	2000 10 9.7 2005	Annual 2001 Annual 2006 Annual 2006	Objective and Perfor 2002  10 10 0bjective and Perfor 2007	Provisional  Tmance Data 2003  10  Provisional  Tmance Data 2008  9.5	2004 D

# FORM NOTES FOR FORM 11

The performance measure for child fatality review was discontinued June 2005.

the performance measure for birth defects prevention and surveillance was discontineud June 2005

### FIELD LEVEL NOTES

1. Section Number: Performance Measure #1

Field Name: PM01 Row Name: Column Name: Year: 2002 Field Note: NM is reporting

numerator: the number of infants screened AND who were found to have a confirmed positive case AND who had appropriate follow-up.

denominator: the number of infants screened and found to have a confirmed positive case

2. Section Number: Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2002 Field Note:

The 2002 indicator is based on the State estimates from SLAITS.

3. Section Number: Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2003 Field Note:

The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

4. Section Number: Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2004 Field Note:

The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.

5. Section Number: Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2002 Field Note:

The 2002 indicator is based on the State estimates from SLAITS.

6. Section Number: Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2003 Field Note:

The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

Section Number: Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2004 Field Note:

The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.

8. Section Number: Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2002 Field Note:

The 2002 indicator is based on the State estimates from SLAITS.

9. Section Number: Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2003 Field Note:

The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

10. Section Number: Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2004 Field Note:

The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.

11. Section Number: Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2002 Field Note:

The 2002 indicator is based on the State estimates from SLAITS.

**12. Section Number:** Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2003 Field Note:

The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

13. Section Number: Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2004 Field Note:

The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.

14. Section Number: Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2002 Field Note:

Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.

15. Section Number: Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2003 Field Note:

The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

16. Section Number: Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2004 Field Note:

The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.

17. Section Number: Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2002 Field Note:

NM data is from the SLAITS/Immunization survey of CDC

18. Section Number: Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2003 Field Note:

Report is for 4:3:1:3:3 from national immunization survey, coverage age 19-35 months; up to date for age. Improved performance attributed to stronger immunization program and no vaccine shortages for the reporting period.

19. Section Number: Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2004 Field Note:

Estimate is from the CDC National Immunization Survey done with SLAITS methodology for the state of NM.

20. Section Number: Performance Measure #8

Field Name: PM08 Row Name: Column Name: Year: 2003 Field Note:

2003 provisional data for number of births to teens; the denominator is a "best guess"; the 2003 data should be considered very provisional.

21. Section Number: Performance Measure #9

Field Name: PM09 Row Name: Column Name: Year: 2002 Field Note:

1999, dental sealant estimate based on 1998 and 2000 report.

2002 at 48%; 2003 at 48%; there was an increase in non-profit dental sealant programs in target schools.

22. Section Number: Performance Measure #9

Field Name: PM09 Row Name: Column Name: Year: 2003 Field Note:

This is a rough estimate; no surveillance was done in this year; the dental program reported the same level of effort, hence the same estimated level of coverage. This coverage is among children enrolled in schools with a high proportion of children on the free or subsidized meal program.

23. Section Number: Performance Measure #9

Field Name: PM09 Row Name: Column Name: Year: 2004 Field Note:

This is a rough estimate; no surveillance was done in this year; the dental program reported the same level of effort, hence the same estimated level of coverage. This coverage is among children enrolled in schools with a high proportion of children on the free or subsidized meal program

NOTE; the National Survey of Children's Health found that 78.8% of children 6-9 years had dental coverage; of those with coverage, 95.6% of children 6-9 years got all routine dental care needed - the survey does not specify if sealants were part of such care. If sealants were included, this would mean that a roughly estimated 82,300 children age 6-9 got a sealant = 74.9% of all children age 6-9.

24. Section Number: Performance Measure #10

Field Name: PM10 Row Name: Column Name: Year: 2003 Field Note:

Intercensal population denominators are an issue in New Mexico. The census estimates are deemed lower than the more correct estimate for the state. The more correct estimates are produced by UNM Bureau Business & Economic Research (BBER). Thus, use these rates with caution. The actual number of deaths reported to vital records is correct: past three years 29, 25, 25 deaths and a 2003 figure of 26 provisional.

25. Section Number: Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2002 Field Note:

The data source is NM PRAMS; the 2000 data are complete and final; the 2001 and 2002 data are estimates based on performance to date.

26. Section Number: Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2003 Field Note:

This is actually a report of breast-feeding initiation among all NM resident, NM occurrence mothers from NM PRAMS. The estimate is from 2001 data; and 2002 data will become available in late fall 2004.

27. Section Number: Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2004 Field Note:

Note: Estimate from NM PRAMS.

28. Section Number: Performance Measure #13

Field Name: PM13 Row Name: Column Name: Year: 2002 Field Note:

The 3 year estimate of children at or below 200% poverty and had no health insurance was 14.8% (US Census, Current Population Survey). The 2000 estimate of NM children without insurance was 21% (NM Kids Count).

29. Section Number: Performance Measure #13

Field Name: PM13 Row Name: Column Name: Year: 2003 Field Note:

The most recent estimate from the Current Population Survey (CPS) for 1999-2001 was 21% of NM children were uninsured. This is the report for 2003.

30. Section Number: Performance Measure #13

Field Name: PM13 Row Name: Column Name: Year: 2004 Field Note:

Note: Data from both the Current Population Survey and the newly released National Survey of Child Health show that 9.6% of children have no insurance coverage. NM has reset its target to 10 for period 2004 thru 2009; it is not reasonable to set it lower - the state should be able to maintain ground if present priorities remain actively pursued.

31. Section Number: Performance Measure #14

Field Name: PM14 Row Name: Column Name: Year: 2002 Field Note:

Medicaid data has not been completed and submitted to Title V MCH; will update when it arrives. This is a reasonable estimate

32. Section Number: Performance Measure #14

Field Name: PM14 Row Name: Column Name: Year: 2003 Field Note:

Data for FY2002 appear to be under-reported; data for FY2003 appears to be more consistent with previous years. The numerator includes infants and children age 1-20 who received a service. The denominator includes the population estimate for 2002 of infants and children multiplied by 60%. It is estimated that 60% of NM children are at or below 185% of poverty and potentially eligible for Medicaid.

33. Section Number: Performance Measure #14

Field Name: PM14
Row Name:
Column Name:
Year: 2004
Field Note:

Census data is for 2003; 2004 estimates are not available. The target was reset to 80% for next 5 years; the state would aim to hold ground.

# Section Number: Performance Measure #15

Field Name: PM15 Row Name: Column Name: Year: 2003 Field Note:

Note: the provisional report had 291 VLBW infants; the final, after VRHS received the out of state birth information on NM resident infants, there were 319 - a difference of 28 VLBW infants. . NM will try to analyze the data and understand if these were out of state or in-state births.

# 35. Section Number: Performance Measure #16

Field Name: PM16 Row Name: Column Name: Year: 2003 Field Note:

The number of teen suicide deaths is provisional; the census estimate for the denominator is not final.

# 36. Section Number: Performance Measure #16

Field Name: PM16 Row Name: Column Name: Year: 2004 Field Note:

The target will not be revised; suicide numbers and rates are highly variable from year to year.

# 37. Section Number: State Performance Measure #20

Field Name: SM20 Row Name: Column Name: Year: 2002 Field Note:

The state has limited capacity to report on this indicator; NM PRAMS data is used; PRAMS reports on if the mother had home visiting services and NOT on the nature of the services. During the comprehensive assessment years (FY2004-2005) NM may work on obtaining a more accurate estimate for this important indicator.

The data were updated June 2005; PRAMS estimate for post partum home visiting, first time mother is used: = 11%

# 38. Section Number: State Performance Measure #20

Field Name: SM20 Row Name: Column Name: Year: 2003 Field Note:

The PRAMS estimate of 4.3% is much lower than previous years. This data needs to be checked.

The state has limited capacity to report on this indicator; NM PRAMS data is used; PRAMS reports on if the mother had home visiting services and NOT on the nature of the services. During the comprehensive assessment years (FY2004-2005) NM may work on obtaining a more accurate estimate for this important indicator.

The data were updated June 2005; PRAMS estimate for post parturn home visiting, first time mother is used: = 9.7%

# 39. Section Number: State Performance Measure #20

Field Name: SM20 Row Name: Column Name: Year: 2004 Field Note:

The state has limited capacity to report on this indicator; NM PRAMS data is used; PRAMS reports on if the mother had home visiting services and NOT on the nature of the services. During the comprehensive assessment years (FY2004-2005) NM may work on obtaining a more accurate estimate for this important indicator.

The data were updated June 2005; PRAMS estimate for post partum home visiting, first time mother is used: = same as 2003, PRAMS data for 2004 will be available end 2005.

# 40. Section Number: State Performance Measure #21

Field Name: SM21 Row Name: Column Name: Year: 2002 Field Note:

NM PRAMS, 1999 and 2000 found 43.6% (CI 41.0, 46.2) of pregnancies resulting in live birth were unintended. The 2001 data will be available by December 2003; 2002 data by June 2004.

# 41. Section Number: State Performance Measure #21

Field Name: SM21 Row Name: Column Name: Year: 2003 Field Note:

Estimate based on 2000-2001 NM PRAMS data. Data for 2002 will become available in fall 2004.

# 42. Section Number: State Performance Measure #21

Field Name: SM21 Row Name: Column Name: Year: 2004 Field Note:

NM PRAMS estimate for calendar 2003 is reported in 2004

# 43. Section Number: State Performance Measure #22

Field Name: SM22 Row Name: Column Name: Year: 2002 Field Note:

The 2002 estimate of 14 percent of NM children who are present at a domestic violence event is from police reporting from the NM domestic violence project. In 2000, NM PRAMS estimated that 12.6% of the birth population was potentially exposed to physical abuse of NM mothers by their partners.

44. Section Number: State Performance Measure #22

Field Name: SM22 Row Name: Column Name: Year: 2003 Field Note:

The data for this year has not yet been released; NM reports the same estimate as for last year as a very provisional number.

45. Section Number: State Performance Measure #22

Field Name: SM22 Row Name: Column Name: Year: 2004 Field Note:

The 2004 estimate of 14 percent of NM children who are present at a domestic violence event is from police reporting from the NM domestic violence project.

46. Section Number: State Performance Measure #24

Field Name: SM24 Row Name: Column Name: Year: 2003 Field Note:

The state Title V program has a coordinated program of maternal, fetal, infant and child death review. We do not have, nor do we anticipate having, resources to conduct FIMR/fetal death review. Thus our index of 4 forms of review is shortened to 3 forms of review.

47. Section Number: State Performance Measure #25

Field Name: SM25 Row Name: Column Name: Year: 2002 Field Note:

The NM Birth Defects Prevention and Surveillance System (BDPASS) was fully functioning in 2002; in 2003, due to loss of staff the surveillance function was not completed; it will take one-two years to create and fill an epidemiologist position to do this work. The data base supporting BDPASS is being re-built; the work is expected to be done in FY04. Nevertheless, prevention functions continue.

48. Section Number: State Performance Measure #26

Field Name: SM26 Row Name: Column Name: Year: 2003 Field Note:

State Performance Measure 26 (8). Prevalence of overweight and obesity among children age 0-5. Data for numerator and denominator are not available at this time. We will edit the form when the PEDNES (CDC) data are available.

49. Section Number: State Performance Measure #26

Field Name: SM26 Row Name: Column Name: Year: 2004 Field Note:

data has not been forthcoming from CDC PedNSS on children 0-5; the state has no reason to think the percentage has changed, indeed in the present environment, the percentage of children 0-5 who are overweight and obese may have increased.

NOTE: this measure will be revised for period 2006-2009; the state will monitor and report on youth in high school from the YRRS, using self report height and weight and a

BMI calculation.

# FORM 12 TRACKING HEALTH OUTCOME MEASURES [SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)] STATE: NM

			nual Objectiv	e and Perfor		<u>ta</u>		
	2000	2001	2002		2003		2004	
Annual Performance Objective			7	7		6.5		6.
Annual Indicator	6.6		6.4	6.1		5.4		6.
Numerator	180		174	168		150		16
Denominator	27,206	27	7,101	27,708		27,799		27,37
Is the Data Provisional or Final?	•				Final		Provisiona	al
		<u>Ar</u>	nual Objectiv	e and Perfor	mance Dat	<u>ta</u>		
	2005	2006	2007		2008		2009	
Annual Performance Objective	6.1		6.1	6		6		
Numerator Denominator	not required for ful		or the above ye	ars. Numera	ior, Denom	illator and	Allitual Illuic	alui
TCOME MEASURE # 02								
TCOME MEASURE # 02  e ratio of the black infant mortality rate to the white infant mortality	rate.	٨٢	onual Objectiv	o and Porfor	rmanco Dat	ta.		
			nnual Objectiv 2002	e and Perfor		t <u>a</u>	2004	
e ratio of the black infant mortality rate to the white infant mortality	2000	2001	nnual Objectiv 2002 1.6	e and Perfor	mance Dat	<u>ta</u>	2004	
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OUTCOME MEASURE # 05					
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PUTCOME MEASURE # 06 The child death rate per 100,000 children aged 1 through 14.  Annual Performance Objective  Annual Indicator  Numerator  Denominator	2000 28 19.6 79	Annual 6 2001 28 22.1 94 425,118	2002 27.5 21.3 92 431,109	27.5 27.7 108 390,440	2004 26. 10 390,44
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FORM NOTES FOR FORM 12
None

FIELD LEVEL NOTES

None

# CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS STATE: NM 1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate. 3 2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups. 3 3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process. 3 4. Family members are involved in service training of CSHCN staff and providers. 3 5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member). 2 6. Family members of diverse cultures are involved in all of the above activities. 2 Total Score: 16 Rating Key 0 = Not Met 1 = Partially Met 2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

# FORM 14 LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: NM FY: 2006

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase ,list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

- 1. Improve access to and use of health & health related services including health insurance and other coverage such as Medicaid, S-CHIP for all MCH population groups
- 2. Improve the transition from childhood ages to young adulthood for children & youth with special health care needs to assure uninterrupted access to health care and related transition services
- 3. Improve indicators of health in the preconceptional and perinatal periods, including but not limited to smoking, alcohol, folic acid use, family violence, intention of pregnancy, access to and use of health care
- 4. Reduce indicators of violence affecting the MCH population with focus on reducing the number of children withnessing violence, the rate of substantiated child abuse and on reducing the percent of women who report physical abuse before & during pregnancy
- 5. Reduce unintended live births to teens, and the related prevalence of chlamydia among teens
- 6. Promote healthy weight and physical fitness among parents and their children; reduce overweight and obesity in the MCH population with focus on infants, early childhood and adolescents to reduce psychological and chronic disease problems
- 7. Reduce rates of fatal & non-fatal unintentional injury among children and teens, with emphasis on interventions regarding injuries in motor vehicular crashes and home-safety practices
- 8. Promote positive youth development experiences with emphasis on building personal & social assets at the family, school and community levels, and with a view to reduce the proportion of youth who engage risk behaviors that often have serious life-long consequences.
- 9. Strengthen the role of males in MCH through promotion of effective initiatives in healthy fatherhood and in reproductive health through male involvement strategies
- 10. Monitor the health of immigrants in the MCH population

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

# FORM 15 TECHNICAL ASSISTANCE(TA) REQUEST

STATE: NM APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: N/A	Request Dr. Pat Lattore, UCLA, to lead a leadership seminar for 2 days with the Title V Family Health Management Team in Santa Fe.	Dr. Lattore has taught leadership for Dr. Marion Baer's MCH Leadership Institute and Title V Manager has found this training very valuable.	Dr. Pat Lattore
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
3.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
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8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
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If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:		
If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:		

FORM NOTES FOR FORM 15

FIELD LEVEL NOTES

None

None

# **FORM 16** STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET STATE: NM

SP# 19

PERFORMANCE MEASURE: The number of 33 counties adopting the conceptual framework of Healthy Youth/Healthy Communities through an

Assets/Resiliency model approach when working with youth.

STATUS: Active

GOAL To reduce high risk behaviors in youth by increasing the number of internal and external assets in their lives

**DEFINITION** The Healthy Youth initiative is based on developing internal and external assets in youth that are essential to normal

growth and development. Models in use include Youth Development of Search Institute including assessment measures;

Healthy Communities in NM;

Numerator:

The number of counties adopting the conceptual framework of Healthy Youth/Healthy Communities

Denominator:

The number of counties in the State = 33

Units: 1 Text: Ratio

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** Search Institute Profiles of Student Life: Attitude and Behaviors. Number of Counties requesting training and surveying

resources on the Assets/ Resiliency model Not all counties/schools will choose to survey their students, some sites will select to use different measurement tools, sites engaging in this iniative without our assistance have no obligation to report

to the state.

Research shows youth reporting lack of assets have a higher correlation with risk behaviors i.e. sex, suicide, violence, school failure, dropout. SIGNIFICANCE

SP # 20

PERFORMANCE MEASURE: Percent of first newborns/moms receiving support services/parenting through community home visiting/support programs

STATUS:

Active

GOAL The development of a state-wide system of family support which promotes optimal infant & child development and well

being.

**DEFINITION**The proportion of new mothers who report home visiting or other support services before delivery and after delivery is

reported in NM PRAMS.

Numerator:

Numerator: Number of first newborns/moms receiving HV or support services

Denominator:

Denominator: Total number of first births annually (by county) & for state

Units: 100 Text: percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** 

**SIGNIFICANCE** 

PRAMS and Families First data for #1; would have to explore if there are existing data bases or develop for #2.

In today's world there are increasing challenges of parenting and providing stable family life as demonstrated by the following: changes in family structure--increase in teen & single parents and those not prepared to parent their children; increased divorced rate, children spending less time with their parents and more children living in foster homes; increased

exposure to violence through media; increasing number of children living in poverty

PERFORMANCE MEASURE: Reduce unintended pregnancy in New Mexico to less than 30% of births

STATUS: Active

GOAL To improve maternal and infant health by reducing unintended pregnancy in New Mexico to less than 30% of live births.

**DEFINITION**Unintended pregnancies are those that a mother reported as not wanted or wanted later; Intended pregnancies are those a

mother reported as wanted then or sooner.

Numerator

Number of mistimed and unwanted births from NM PRAMS

Denominator:

Number of NM Resident Births
Units: 100 Text: percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

DATA SOURCES AND DATA ISSUES NM PRAMS: 1997 is our first year of data; data will be ready for analysis in November 1998. Vital records for 1997 closed in

July 1998; data are weighted by CDC PRAMS, accounting for factors in the sample frame, response rates per stratum, and response rate per question. Henceforth, data for each year will be produced the winter of the following year, 1998 data in

November 1999 and so on.

SIGNIFICANCE Unintended pregnancy is associated with demographic characteristics of teen ages, single women/men, lower education

and income levels in women and men; maternal health problems of poor access to family planning services, late prenatal care, smoking, family violence and other family stressors; infant outcomes of low birth weight, late or no infant health care

including imunizations.

SP # 22

PERFORMANCE MEASURE: Reduce the number of children witnessing violence (exposed to domestic or sexual violence) as expressed by percent of

children present at a domestic violence scene.

STATUS: A

GOAL Reduce the number of children witnessing violence (exposed to domestic violence or sexual violence).

**DEFINITION**The percent of children who were present at a domestic violence scene as reported by law enforcement.

Numerator

The number of children present at a domestic violence scene as reported by law enforcement.

Denominator:

The number of domestic violence police reports

Units: Text: per cent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

DATA SOURCES AND DATA ISSUES

UCR data has its own limitations, mainly limited reporting by local law enforcement jurisdictions, and limited disclosure by

the victims themselves. We hope to get a better measure developed that includes DV shelter and rape crisis center data. Because of a large degree of under reporting, these sources represent only a portion of the violence experienced by

children. There is no direct measure of children witnessing domestic violence.

SIGNIFICANCE Many children and young adults are exposed to domestic violence in the home or experience some form of sexual violence

from people they know. There is increasing documentation about the adverse effects, including increased substance abuse, teen pregnancy, truancy, suicidal behaviors, eating disorders and aggressive acting out behaviors. There is a profound lack of mental health infrastructure to deal with these exposures, high prevalence of domestic violence in our society and significant lack of protective skills in avoiding acquaintance rape. We are using the rape rate as an index at the present time because it is accurate, can be tracked, and there is a clear correlation between children who witness violence and the

propensity to engage in violent acts including rape as they get older.

PERFORMANCE MEASURE: New Mexico's Pregnancy Risk Assessment And Monitoring System (PRAMS)

STATUS: Ad

GOAL T

To collect, analyze and disseminate data and information regarding maternal and infant health, in order to improve health,

access to and utilization of health & health related services, and reduce preventable morbidity and mortality.

**DEFINITION** 

Numerator:

Ranked scale, from 0-7 1=funding support 1=active Steering committee 1=full implementation/joint NM+CDC protocols 1=response rate 70% 1=annual surveillance report 1=special analysis projects 1=data used in policy, program, education

Denominator:

Ranked Scale, 1 point for each item in scale, total 7 points possible 1=funding support 1=active Steering committee 1=full implementation/joint NM+CDC protocols 1=response rate 70% 1=annual surveillance report 1=special analysis projects

1=data used in policy, program, education

Units: 7 Text: Scale

**HEALTHY PEOPLE 2010 OBJECTIVE** 

DATA SOURCES AND DATA ISSUES Data source: the PRAMS sample of 2,500 mothers each year is drawn monthly from NM live birth files, and is stratified to

over sample low birth weight minorities; it is a mailed survey with telephone follow-up to improve response performance and a community contact protocol to reach selected minority groups. Data issues: response rates, particularly amongst minority

women, women in poverty, homeless, and other selected groups.

SIGNIFICANCE

PRAMS data will produce prevalence estimates and increase understanding, regarding important associations between SES status, health status problems [ie, low birth weight], health risk behavior problems [ie violence, alcohol, tobacco, infant sleep

position], healthy behaviors [ie family support, infant feeding, early immunization], barriers to use of care [ie preconceptional, prenatal, infant, family planning], and many other topics. PRAMS data will be used to inform policy, plan programs, educate providers and the public. NM PRAMS has funding partnerships with Title V MCH, the CDC's PRAMS

project, the NM Children Youth and Families Department and NM Medicaid; data analysis partnerships include other DOH MCH programs, community networks, US Mexico border health programs, Indian Health, Navajo Nation and university

researchers

**PERFORMANCE MEASURE:** The state Title V program has a coordinated program of maternal, fetal, infant and child death review

STATUS:

To reduce preventable maternal, fetal, infant and child mortality through a coordinated program of mortality-fatality review GOAL

whose purpose is to use retrospective review methods to identify prevention, risk reduction and systems improvement

factors in order to prevent future deaths.

**DEFINITION** 3 components functioning: maternal mortality review (MMR), child fatality review (CFR) and staff & resources

Numerator:

Denominator:

Units: Yes Text: Text

**HEALTHY PEOPLE 2010 OBJECTIVE** 

Data: Infant and child death reports are from the Office of Medical Investigator (OMI); the OMI is a statewide system and **DATA SOURCES AND DATA ISSUES** 

includes all deaths except those that occur on a federal reserve (military, tribal). Maternal mortality data is based on linked

files comprising fetal death, live birth and female deaths.

Retrospective review of maternal, fetal, infant and child deaths provides insight into prevention of future similar deaths by **SIGNIFICANCE** 

identifying prevention factors, risk reduction factors and community systems improvement factors. While mortality and fatality data from vital records provides descriptive data about rates, demographic and geographic distributions, the case by case review illuminates key prevention factors. Death review is key to evaluation of selected public health initiatives such as "Back to Sleep" for SIDS prevention, seat belts and infant restraints, the role of alcohol in MVC, Homicide and suicide.

**PERFORMANCE MEASURE:** The state has a program for Birth Defects Prevention and Surveillance

Active STATUS:

GOAL To prevent or reduce risks of birth defects in New Mexico through a combined program of prevention and surveillance.

**DEFINITION** 6 functions, 1 point per function: 1. Passive surveillance through linked data bases; 2. Active surveillance and case ascertainment for NTD's and OFC's; 3. A prevention program based on healthy preconceptional health practices; 4.

preconceptional and prenatal use of recommended dose of folic acid; 5. adequate staffing for surveillance & prevention; 6.

adequate funding for surveillance and prevention. Total 6 points

Numerator: 6 functions Denominator: 6 functions

Units: Yes Text: 4

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** Surveillance: live birth files for annual denominator; link to childrens chronic conditions registry based on CSHCN services,

Medicaid, IHS newborn data and active surveillance in specialty pediatric offices statewide Prevention: BRFSS and NM PRAMS for folic acid knowledge and use of alcohol, substances and tobacco.

The risk of selected birth defects can be reduced by 0.4 mg per day of folic acid before and during pregnancy; and abstention from tobacco, alcohol and other drugs. **SIGNIFICANCE** 

**PERFORMANCE MEASURE:** The Prevalence of Childhood Overweight & Obesity

Active STATUS:

To assure an environment in communities and schools that promotes healthy eating and physical activity patterns in GOAL

children and adolescents

**DEFINITION** Percent of children who are overweight or obese age 0-5

Number of overweight or obese children age 0-5 in New Mexico (equal to or greater than 90th percentile Body Mass Index

(BMI)

Denominator:

Number of children age 0-5 in New Mexico

Units: 100 Text: 1

**HEALTHY PEOPLE 2010 OBJECTIVE** Reduce the proportion of children and adolescents who are overweight or obese

State WIC data Data Issues: State WIC data is limited and does not reflect the entire population, however, this data is **DATA SOURCES AND DATA ISSUES** 

available at this time. The state will use Youth Risk Behavior Survey data next year.

Childhood obesity is associated with adverse medical and psycho-social consequences. Overweight acquired during **SIGNIFICANCE** 

childhood or adolescence may persist into adulthood with increased risks of some chronic disease later in life. As a result, the rising prevalence of obesity and chronic disease will place more burdens on the health care system, including increased costs of medical care. Following the published data from the CDC's Third National Health and Nutrition Examination Survey (NHANES III), concern has been expressed that the prevalence of obesity in children and adolescents may be increasing in New Mexico, but definitive data are lacking. Therefore, Title V leadership are committed to establishing a baseline to assess the extent of obesity on childhood in New Mexico and develop a plan of action for its prevention.

FORM NOTES FOR FORM 16
None

FIELD LEVEL NOTES

None

# FORM 17 HEALTH SYSTEMS CAPACITY INDICATORS FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA STATE: NM

<b>HEALTH SYSTEMS C</b>	CAPACITY	MEASURE # 01
-------------------------	----------	--------------

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	Annual Indicator Data							
	2000	2001	2002	2003	2004			
Annual Indicator	25.0	13.5	33.3	34.0	34.0			
Numerator	326	179	450	464	464			
Denominator	130,628	132,236	134,973	136,661	136,661			
Is the Data Provisional or Final?				Final	Provisional			

# **HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	Annual Indicator Data				
	2000	2001	2002	2003	2004
Annual Indicator	86.2	88.1	89.3	71.4	68.1
Numerator	15,401	16,729	17,262	14,060	13,765
Denominator	17,875	18,998	19,331	19,686	20,208
Is the Data Provisional or Final?				Final	Final

# **HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2000	2001	2002	2003	2004
Annual Indicator	43.0	86	75.9	64.2	61.0
Numerator	40		164	136	164
Denominator	93		216	212	269
Is the Data Provisional or Final?				Final	Final

# HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2000	2001	2002	2003	2004
Annual Indicator	59.0	60.3	61.9	60.0	62.4
Numerator	16,051	16,342	16,118	15,309	15,900
Denominator	27,206	27,101	26,019	25,496	25,500
Is the Data Provisional or Final?				Final	Provisional

			Annual Indicator Da	ata	
	2000	2001	2002	2003	2004
Annual Indicato	r 33.8	25.1	25.1	54.1	54.
Numerato	r 19,370	18,560	18,560	41,308	41,30
Denominato	r 57,263	73,845	73,845	76,338	76,40
Is the Data Provisional or Final?	2				Descriptional
IEALTH SYSTEMS CAPACITY MEASURE # 08		ices from the State Ch	•	•	Provisional  SHCN) Program.
EALTH SYSTEMS CAPACITY MEASURE # 08		ices from the State CF	nildren with Special Ho	ealth Care Needs (CS	
HEALTH SYSTEMS CAPACITY MEASURE # 08 The percent of State SSI beneficiaries less than 16 years old receiving Annual Indicato	ng rehabilitative serv		Annual Indicator Da	ealth Care Needs (CS	SHCN) Program.

5,974

Denominator

Is the Data Provisional or Final?

5,640

5,857

Final

5,456

5,450

Provisional

# FORM NOTES FOR FORM 17

None

# FIELD LEVEL NOTES

Section Number: Health Systems Capacity Indicator #01

Field Name: HSC01 **Row Name:** Column Name: Year: 2002 Field Note:

2001 data is based on asthma as primary discharge diagnosis; only 179 discharges reported; this is half of the reporting for each of three previous years. We checked with the data source, the NM Inpatient Hospital Discharge Data (HIDD) of the NM Health Policy Commission. They found the data to be correct. NM Title V will need to investigate this very large change to understand why so many fewer children are hospitalized for asthma; previous year data will be compared to the 2001 data. The 2002 data is a rough ball park estimate based on 1998-99-2000 average.

NEW NOTE, JUNE 2005: Data reported for 2001-2003 were incorrect; the DOH obtained the HIDD data and did the analysis. Unfortunately the website does not allow correction for 2001 data. It should read 410 asthma hospital discharges and 133,304 children age 0-4 years (rate 30.8 per 10,000 children).

Section Number: Health Systems Capacity Indicator #02 2.

Field Name: HSC02 Row Name: Column Name: Year: 2002 Field Note:

1998 estimate, from previous reporting

2001 estimate: Medicaid reported 37,996 infants enrolled and 33458 infants screened; this data appears to be a two-year report; NM Title V MCH is working with Medicaid

to clarify the data. Data were divided by 2 to provide the best although rough estimate.

The 2002 estimate is based on 3 year average of 1999-2001.

Section Number: Health Systems Capacity Indicator #03

Field Name: HSC03 **Row Name:** Column Name: Year: 2002 Field Note:

SCHIP data for 1998 and 1999 was not available; the program was introduced in 1998 with statewide roll-out in 1999. The data provided for 1998 and for 1999 is a very very

rough estimate based on data provided for 2000.

The number of SCHIP infants enrolled (645) is highly discrepant for previous year of 93 infants. NM Title V MCH will have to work with Medicaid to clarify the data. The 2002 estimate is based on 561 infants screened/645 enrolled

Section Number: Health Systems Capacity Indicator #04

Field Name: HSC04 Row Name: Column Name: Year: 2002 Field Note:

The precise numerator/denominator for 2000 are not available for this report; Kottlechuck index estimates are 31.1% at adequate level; 27.9% at adequate plus.

Section Number: Health Systems Capacity Indicator #04

Field Name: HSC04 **Row Name:** Column Name: Year: 2003 Field Note:

2004 data are provisional; and based only on those births for which Kotelchuk estimates can be reported

Section Number: Health Systems Capacity Indicator #04

Field Name: HSC04 Row Name: Column Name: Year: 2004 Field Note:

2004 data are provisional; and based only on those births for which Kotelchuk estimates can be reported.

Section Number: Health Systems Capacity Indicator #07

Field Name: HSC07 Row Name: Column Name: Year: 2002 Field Note:

The number of medicaid enrolled children is much greater than expected; will work with Medicaid to clarify the discrepancy. The estimate for 1998 and fo 2002 is based on a

three year average of available data

# FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #05 (MEDICAID AND NON-MEDICAID COMPARISON) STATE: NM

INDICATOR #05 Comparison of health system capacity	VEAD	DATA SOURCE	POPULATION			
indicators for Medicaid, non-Medicaid, and all MCH populations in the State	YEAR		MEDICAID	NON-MEDICAID	ALL	
a) Percent of low birth weight (< 2,500 grams)	2004	Other	8	7	7.8	
b) Infant deaths per 1,000 live births	2004	Other	6	5	6.1	
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2004	Other	60		65.7	
d) Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2004	Other	50	60	62.4	

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: NM

INDICATOR #06 The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range 1 to 20) (Age range to ) (Age range to )	2004	185
c) Pregnant Women	2004	185

# FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL) STATE: NM

YEAR	PERCENT OF POVERTY LEVEL SCHIP
2004	235_
2004	
2004	
	2004

# FORM NOTES FOR FORM 18

None

# FIELD LEVEL NOTES

1. Section Number: Indicator 06 - SCHIP

Field Name: SCHIP\_Women Row Name: Pregnant Women

Column Name: Year: 2006 Field Note:

S-CHIP does not cover pregnant women in New Mexico

Section Number: Indicator 05 Field Name: LowBirthWeight

Row Name: Percent of ow birth weight (<2,500 grams)

Column Name: Year: 2006 Field Note:

Rough estimate, based on 2000 linked birth+Medicaid study

Section Number: Indicator 05 Field Name: InfantDeath

Row Name: Infant deaths per 1,000 live births

Column Name: Year: 2006 Field Note:

Educated guess; the linked birth+Medicaid study has never evaluated infant mortality. It would require NM Birth+death linked to Medicaid.

 Section Number: Indicator 05 Field Name: CareFirstTrimester

Row Name: Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

Column Name: Year: 2006 Field Note:

Estimate based on NM PRAMS estimates for 2002-03 births. I am not sure of the value of this data report because those not on Medicaid are by no means a homogeneous group. They include the insured (84% first trimester care) AND the uninsured (56% first trimester) AND other payers like IHS (66% first trimester).

Section Number: Indicator 05
 Field Name: AdequateCare

Row Name: Percent of pregnant women with adequate prenatal care

Column Name: Year: 2006 Field Note:

This is a rough estimate.

# **FORM 19** HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM STATE: NM

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Informatioin)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner?  (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)	
ANNUAL DATA LINKAGES Annual linkage of infant birth and infant death certificates	2	No	
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	No	
Annual linkage of birth certificates and WIC eligibility files	1	No	
Annual linkage of birth certificates and newborn screening files	2	Yes	
REGISTRIES AND SURVEYS Hospital discharge survey for at least 90% of in-State discharges	2	No	
Annual birth defects surveillance system	2	Yes	
Survey of recent mothers at least every two years (like PRAMS)	3	Yes	

- 1 = No, the MCH agency does not have this ability.
  2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
  3 = Yes, the MCH agency always has this ability.

# FORM 19 HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM STATE: NM

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other: NM YOuth Tobacco Survey	3	Yes

# HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity (The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Pediatric Nutrition Surveillance System (PedNSS)	3	Yes
WIC Program Data	3	Yes
Other:		

### \*Where:

- 1 = No
- 2 = Yes, the State participates but the sample size is <u>not</u> large enough for valid statewide estimates for this age group.
- 3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

### Notes:

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

### FORM NOTES FOR FORM 19

None

#### FIELD LEVEL NOTES

1. Section Number: Indicator 09A

Field Name: BAD

Row Name: Annual linkage of infant birth and infant death certificates

Column Name: Year: 2006 Field Note:

most recent linkage year 2000 births. VRHS has other priorities at this time: system changes for death file; new birth certificate implementation.

When files are linked, MCH could request the data; but it i preferable that MCH work in collboration with the VRHS analysis team on key areas of interest to Title V MCH.

2. Section Number: Indicator 09A

Field Name: BAW

Row Name: Annual linkage of birth certificates and WIC eligibility files

Column Name: Year: 2006 Field Note:

This is on the slate for coming years. In the meanwhile, NM PRAMS captures prenatal WIC client status and can provide WIC and non-WIC estimates.

3. Section Number: Indicator 09A

Field Name: BAN

Row Name: Annual linkage of birth certificates and newborn screening files

Column Name: Year: 2006 Field Note:

Newborn Genetic = No, not yet. This would have to be a linkage between the State Laboratory Division files for genetic screening and the birth files.

Newborn hearing screening: the birth registration has four fields = screen pass-fail or discharge without screen; rt ear, lft ear, and type of test.

4. Section Number: Indicator 09A

Field Name: Discharge

Row Name: Hospital discharge survey for at least 90% of in-State discharges

Column Name: Year: 2006 Field Note: NOTE:

Hospital discharge files can be requested from the NM Health Policy Commission. They have been short staffed, so data requests are not possible at this time.

Section Number: Indicator 09A

Field Name: BirthDefects

Row Name: Annual birth defects surveillance system

Column Name: Year: 2006 Field Note:

The NM proposal to CDC for Birth Defects Prevention and Surveillance was approved but not funded. A report for 2002 will be done this year - possibly by October 2005.

Future prospects for this data are not good; state CMS program does not have funds for this kind of work.

6. Section Number: Indicator 09B

Field Name: YRBSS\_09B

Row Name: Youth Risk Behavior Survey (YRBS)

Column Name: Year: 2006 Field Note:

NM Youth Risk Resiliency Survey (YRRS) has all CDC YRBS questions; it has state questions on youth developmental assets.

7. Section Number: Indicator 09B

Field Name: Other1\_09B Row Name: Other Column Name: Year: 2006 Field Note:

NM Youth Risk Resiliency Survey (YRRS) has all CDC YRBS questions; it has state questions on youth developmental assets.

8. Section Number: Indicator 09A

Field Name: BAM

Row Name: Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files

Column Name: Year: 2006 Field Note:

most recent linkage in 2000. While this is a priority project, VRHS has other high priorities at this time.

# FORM 20 HEALTH STATUS INDICATORS #01-#05 MULTI-YEAR DATA STATE: NM

		J.AIL.							
HEALTH STATUS INDICATOR MEASURE # 01A									
The percent of live births weighing less than 2,500 grams.									
					Annual Indicator Da	ata			
	2000		2001		2002	2003		2004	
Annual Indicator	r	7.5		7.9	8.0		8.4		7.8
Numerato	r	2,033		2,147	2,224		2,345		2,141
Denominato	r	27,206		27,101	27,708		27,799		27,378
Is the Data Provisional or Final?	?					Final		Provisio	nal
FEALTH STATUS INDICATOR MEASURE # 01B									
he percent of live singleton births weighing less than 2,500 grams.									
					Annual Indicator Da	ata			
	2000		2001		2002	2003		2004	
Annual Indicato	r	6.8		6.8	6.6		6.9		6.4
Numerato				1,814	1,789		1,918		1,760
Denominato	r	26,540		26,583	27,029		27,799		27,378
Is the Data Provisional or Final?	?					Final		Provisio	nal
HEALTH STATUS INDICATOR MEASURE # 02A The percent of live births weighing less than 1,500 grams.					Annual Indicator Da	ata			
	2000		2001		2002	2003		2004	
Annual Indicato	r	1.3		1.1	1.3		1.1		1.1
Numerato	r	357		301	347		319		303
Denominato	r	27,206		27,101	27,708		27,779		27,378
Is the Data Provisional or Final?	?		-			Final		Provisio	nal
HEALTH STATUS INDICATOR MEASURE # 02B									
The percent of live singleton births weighing less than 1,500 grams.									
					Annual Indicator Da	<u>ata</u>			
	2000		2001		2002	2003		2004	
Annual Indicator	r	1.1		1.0	1.0		0.9		0.8
Numerato	r	288		264	276		246		226
Denominato	r	26,540		26,583	27,029		27,779		27,378

Is the Data Provisional or Final?

Provisional

Final

e death rate per 100,000 due to unintentional injuries among childro  Annual Indicator	en aged 14 years a	nd younger.			
Annual Indicator					
Annual Indicator			Annual Indicator Da		
Annual Indicator	2000	2001	2002	2003	2004
			10.0	11.0	11.2
	38		41	46	47
Denominator		454,523	411,531	418,113	418,113
Is the Data Provisional or Final?				Final	Provisional
EALTH STATUS INDICATOR MEASURE # 03B					
e death rate per 100,000 for unintentional injuries among children a	ged 14 years and y	ounger due to motor	vehicle crashes.		
			Annual Indicator Da		
	2000	2001	2002	2003	2004
Annual Indicator			7.0	7.2	7.2
	25		29	30	30
	419,108	454,523	411,531	418,113	418,113
Is the Data Provisional or Final?				Final	Provisional
EALTH STATUS INDICATOR MEASURE # 03C					
e death rate per 100,000 from unintentional injuries due to motor ve			Annual Indicator Da		0004
	2000	2001	Annual Indicator Da	2003	2004
Annual Indicator	2000 40.4	2001	Annual Indicator Da 2002 42.0	<b>2003</b> 38.0	38.0
Annual Indicator Numerator	2000 40.4 108	2001 31.4 87	Annual Indicator Da 2002 42.0 118	2003 38.0 111	38.0
Annual Indicator	2000 40.4 108 267,042	2001 31.4 87	Annual Indicator Da 2002 42.0	<b>2003</b> 38.0	2004 38.0 111 292,375 Provisional

Is the Data Provisional or Final?

Provisional

Provisional

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes	among children age	eu 14 years and your	_		
	2000	2001	Annual Indicator Da 2002	<u>ata</u> 2003	2004
Annual Indicator		600	607.5	597.9	597.9
	2,650		2,500	2,500	2,500
	419,108		411,531	418,113	418,113
Is the Data Provisional or Final?				Provisional	Provisional
HEALTH STATUS INDICATOR MEASURE # 04C					
he rate per 100,000 of nonfatal injuries due to motor vehicle crashes	among youth aged	15 through 24 years.			
	2000	2001	Annual Indicator Da 2002	<u>ata</u> 2003	2004
Annual Indicator	3,068.8	2,760	2,763.4	2,650.7	2,650.7
	8,195		7,756	7,750	7,750
	267,042		280,673	292,375	292,375
Benominator	,				
Is the Data Provisional or Final?				Provisional	Provisional
HEALTH STATUS INDICATOR MEASURE # 05A					
HEALTH STATUS INDICATOR MEASURE # 05A	case of chlamydia.		Annual Indicator Da	Provisional	Provisional
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported	case of chlamydia.	2001	2002	Provisional  ata 2003	Provisional 2004
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator	case of chlamydia.	2001	<b>2002</b> 30.2	Provisional  ata 2003 30.1	Provisional  2004  30.
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator	2000 24.0 1,691	2001 29.8 2,119	30.2 2,218	Provisional  ata 2003  30.1  2,231	2004 30 2,230
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator	2000 24.0 1,691 70,506	2001	30.2 2,218	Provisional  ata 2003 30.1	Provisional
HEALTH STATUS INDICATOR MEASURE # 05A  The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000 24.0 1,691 70,506	2001 29.8 2,119	30.2 2,218	Provisional  ata 2003  30.1  2,231	2004 30.2 2,230 74,039
HEALTH STATUS INDICATOR MEASURE # 05A  The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000 24.0 1,691 70,506	2001 29.8 2,119	30.2 2,218	Provisional  ata 2003  30.1  2,231	2004 30.2 2,230 74,039
HEALTH STATUS INDICATOR MEASURE # 05A  The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?	2000 24.0 1,691 70,506 case of chlamydia.	2001 29.8 2,119 71,004	30.2 2,218 73,473	Provisional  ata 2003  30.1  2,231  74,039	2004 30.1 2,230 74,038 Provisional
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?  HEALTH STATUS INDICATOR MEASURE # 05B The rate per 1,000 women aged 20 through 44 years with a reported	2000  24.0  1,691  70,506  case of chlamydia.	2001 29.8 2,119 71,004	30.2 2,218 73,473 Annual Indicator Da	Provisional  2003  30.1  2,231  74,039	2004 30.1 2,230 74,038 Provisional
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator  Numerator  Denominator  Is the Data Provisional or Final?  HEALTH STATUS INDICATOR MEASURE # 05B The rate per 1,000 women aged 20 through 44 years with a reported  Annual Indicator	2000 24.0 1,691 70,506 case of chlamydia.	2001 29.8 2,119 71,004 2001 8.9	30.2 2,218 73,473 Annual Indicator Da 2002	Provisional  2003  30.1  2,231  74,039  21aa  2003  10.9	2004 30.4 2,230 74,038 Provisional
HEALTH STATUS INDICATOR MEASURE # 05A The rate per 1,000 women aged 15 through 19 years with a reported  Annual Indicator Numerator Denominator Is the Data Provisional or Final?  HEALTH STATUS INDICATOR MEASURE # 05B The rate per 1,000 women aged 20 through 44 years with a reported  Annual Indicator	2000  24.0  1,691  70,506  case of chlamydia.  2000  7.2  2,302	2001 29.8 2,119 71,004 2001 8.9	30.2 2,218 73,473 Annual Indicator Da 2002	Provisional  2003  30.1  2,231  74,039	2004 30.1 2,230 74,038 Provisional

Is the Data Provisional or Final?

Final

Provisional

### FORM NOTES FOR FORM 20

None

### FIELD LEVEL NOTES

1. Section Number: Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2002 Field Note:

This is a very rough estimate. The hospital discharge data for injury has not been accessible since 2000. The Title V MCH program will consult the Injury Epidemiology Program in 2005-06 to plan to obtain this data.

2. Section Number: Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2003 Field Note:

This is a very rough estimate. The hospital discharge data for injury has not been accessible since 2000. The Title V MCH program will consult the Injury Epidemiology Program in 2005-06 to plan to obtain this data.

3. Section Number: Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2004 Field Note:

This is a very rough estimate. The hospital discharge data for injury has not been accessible since 2000. The Title V MCH program will consult the Injury Epidemiology Program in 2005-06 to plan to obtain this data.

Section Number: Health Status Indicator #04B

Field Name: HSI04B Row Name: Column Name: Year: 2003 Field Note:

2003 data available from NM traffic safety.

5. Section Number: Health Status Indicator #04B

Field Name: HSI04B Row Name: Column Name: Year: 2004 Field Note:

2004 data not available from NM traffic safety bureau; used 2002 estimate

# FORM 21 **HEALTH STATUS INDICATORS DEMOGRAPHIC DATA**

STATE: NM

HSI #06A - Demographics (Total Population) Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics) 

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	27,672	22,515	917	3,728	512	0	0	0
Children 1 through 4	108,938	88,496	3,258	15,030	2,154	0	0	0
Children 5 through 9	133,367	107,382	4,686	18,445	2,854	0	0	0
Children 10 through 14	148,133	118,897	4,465	22,106	2,665	0	0	0
Children 15 through 19	152,308	124,437	4,240	20,884	2,747	0	0	0
Children 20 through 24	140,068	115,116	4,207	17,999	2,746	0	0	0
Children 0 through 24	710,486	576,843	21,773	98,192	13,678	0	0	0

HSI #06B - Demographics (Total Population) Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	T Hispanic or Latino Total Hispanic or Latino			
Infants 0 to 1	13,232	14,440	0		
Children 1 through 4	52,883	55,950	0		
Children 5 through 9	64,219	69,149	0		
Children 10 through 14	74,531	73,603	0		
Children 15 through 19	78,156	74,152	0		
Children 20 through 24	71,255	68,812	0		
Children 0 through 24	354,276	356,106	0		

# FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: NM

HSI #07A - Demographics (Total live births) Live births to women (of all ages) enumerated by maternal age and race. (Demographics)

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	58	49	0	9	0	0	0	0
Women 15 through 17	1,591	1,326	24	237	2	2	0	0
Women 18 through 19	2,658	2,219	44	383	7	5	0	0
Women 20 through 34	20,321	17,012	380	2,621	260	47	0	1
Women 35 or older	2,833	2,384	41	326	76	6	0	0
Women of all ages	27,461	22,990	489	3,576	345	60	0	1

HSI #07B - Demographics (Total live births) Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	46	12	0
Women 15 through 17	1,140	451	0
Women 18 through 19	1,693	965	0
Women 20 through 34	10,509	9,812	0
Women 35 or older	1,143	1,690	0
Women of all ages	14,531	12,930	0

## FORM 21 **HEALTH STATUS INDICATORS DEMOGRAPHIC DATA**

STATE: NM

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics) 

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	168	129	6	32	1	0	0	0
Children 1 through 4	45	31	2	12	0	0	0	0
Children 5 through 9	20	14	0	5	1	0	0	0
Children 10 through 14	39	25	1	13	0	0	0	0
Children 15 through 19	123	98	3	20	1	1	0	0
Children 20 through 24	191	154	3	34	0	0	0	0
Children 0 through 24	586	451	15	116	3	1	0	0

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	94	73	1
Children 1 through 4	18	27	0
Children 5 through 9	9	11	0
Children 10 through 14	20	19	0
Children 15 through 19	54	69	0
Children 20 through 24	77	114	0
Children 0 through 24	272	313	1

# FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: NM

**HSI #09A - Demographics (Miscellaneous Data)** Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	570,421	461,729.0	17,567.0	80,193.0	10,932.0	0	0	0	2004
Percent in household headed by single parent	30.0	21.0	40.0	42.0	16.0	0	0	0	2004
Percent in TANF (Grant) families	10.0	21.0	4.0	6.0	0	0	0	0	2004
Number enrolled in Medicaid	341,108	262,079.0	7,251.0	65,615.0	1,817.0	0	0	4,346.0	2004
Number enrolled in SCHIP	22,175	17,911.0	279.0	3,801.0	153.0	0	0	31.0	2004
Number living in foster home care	2,067	1,612.0	145.0	186.0	0	0	0	124.0	2004
Number enrolled in food stamp program	118,735	98,668.0	3,325.0	16,148.0	594.0	0	0	0	2004
Number enrolled in WIC	104,230	93,927.0	2,507.0	4,924.0	755.0	0	0	2,117.0	2004
Rate (per 100,000) of juvenile crime arrests	4,876.0	5,762.0	5,691.0	3,165.0	684.0	0	0	0	2004
Percentage of high school drop- outs (grade 9 through 12)	4.5	3.3	5.5	6.7	2.2	0	0	0	2004

**HSI #09B - Demographics (Miscellaneous Data)** Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	283,021.0	287,293.0	0	2004
Percent in household headed by single parent	20.0	33.0	0	2004
Percent in TANF (Grant) families	31.0	69.0	0	2004
Number enrolled in Medicaid	150,236.0	190,872.0	0	2004
Number enrolled in SCHIP	9,982.0	12,193.0	0	2004
Number living in foster home care	868.0	1,075.0	0	2004
Number enrolled in food stamp program	49,304.0	98,668.0	0	2004
Number enrolled in WIC	26,051.0	77,231.0	948.0	2004
Rate (per 100,000) of juvenile crime arrests	3,918.0	6,639.0	0	2004
Percentage of high school drop-outs (grade 9 through 12)	4.2	6.1	0	2004

# FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: NM

HSI #10 - Demographics (Geographic Living Area) Geographic living area for all resident children aged 0 through 19 years old. (Demographics)

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	258,022
Living in urban areas	57,737
Living in rural areas	148,491
Living in frontier areas	41,375
Total - all children 0 through 19	247,603_

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

# FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: NM

HSI #11 - Demographics (Poverty Levels) Percent of the State population at various levels of the federal poverty level. (Demographics)

POVERTY LEVELS	TOTAL
Total Population	1,850,940.0
Percent Below: 50% of poverty	8.0
100% of poverty	23.0
200% of poverty	24.0

# FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: NM

HSI #12 - Demographics (Poverty Levels) Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)
Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	505,624.0
Percent Below: 50% of poverty	11.0
100% of poverty	25.0
200% of poverty	

### FORM NOTES FOR FORM 21

Form 21, HSI 07: These data are NM resident births (neither the form nor the guidance specifies resident or occurrent births).

The form does not accomodate numbers for women whose race was known but age was not.

The provisional total for 2004 was actually 27745; there were 13 white mothers for whom age not recorded on birth registration; and 1 mother race unknown for whom age not recorded on birth registration.

## FIELD LEVEL NOTES

Section Number: Indicator 06A Field Name: S06\_Race\_Infants Row Name: Infants 0 to 1

Column Name: Year: 2006 Field Note:

All data are 2003 population estimates prepared by the Bureau of Business and Economic Research (BBER) of the University of New Mexico. This note applies to all 2004 population estimates

Section Number: Indicator 07A

Field Name: Race Women35 Row Name: Women 35 or older

Column Name: Year: 2006 Field Note:

There is no place on the form to indicate the number of women, by race, for whom age is unknown. Thus, in NM the provisional total NM Resident live births for 2004 was 27,475. There were 13 births to white women and 1 birth to woman of unknown race for whom AGE was not recorded on birth registration.

Section Number: Indicator 09A Field Name: HSIRace\_Children Row Name: All children 0 through 19

Column Name: Year: 2006 Field Note:

Population estimate is for children age 0-19 years in 2003 from Bureau Business & Economic Research, University of New Mexico.

Section Number: Indicator 09A

Field Name: HSIRace\_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name: Year: 2006 Field Note:

From NM Voices for Children, Special Report on Minority Children, www.nmvoices.org. Data are for 2002

Section Number: Indicator 09A Field Name: HSIRace\_TANFPercent
Row Name: Percent in TANF (Grant) families

Column Name: Year: 2006 Field Note:

The total percent of children age 0-19 and who live in family receiving TANF is a rough estimate of 10% based on 50,000 children/500,000 population.

The racial distribution is from the June 2004 Monthly Statistical Report from NM Human Services Department, the report of Food Stamp, One-parent TANF, two parent

TANF and general assistance participants by race-ethnicity.

Note that of children who were recipients, one parent TANF = 64.3% with children <18; and 57.8% of two parent TANF with children <18 years.

Section Number: Indicator 09A Field Name: HSIRace\_MedicaidNo Row Name: Number enrolled in Medicaid

Column Name: Year: 2006 Field Note:

Medicaid numbers for Oct 2003-Sep 2004

Section Number: Indicator 09A Field Name: HSIRace\_SCHIPNo Row Name: Number enrolled in SCHIP

Column Name: Year: 2006 Field Note:

data are for Oct 2003-Sep 2004

Section Number: Indicator 10 Field Name: Metropolitan

Row Name: Living in metropolitan areas

Column Name: Year: 2006 Field Note:

It appears that the TVIS calculator for total children 0-19 in this report is not working: TVIS reports total 247,603.

New Mexico reported 2003 estimates (most current available):

Metro 258,022 Urban 57,737 Rural 148,491 Frontier 41,375

the correct total for NM is 505,624.

Section Number: Indicator 10

Field Name: Urban

Row Name: Living in urban areas

Column Name: Year: 2006 Field Note:

It appears that the TVIS calculator for total children 0-19 in this report is not working: TVIS reports total 247,603.

New Mexico reported: Metro 258,022 Urban 57.737 Rural 148,491

Frontier 41,375

the correct total for NM is 505,624.

10. Section Number: Indicator 10

Field Name: Rural

Row Name: Living in rural areas

Column Name: Year: 2006 Field Note:

It appears that the TVIS calculator for total children 0-19 in this report is not working: TVIS reports total 247,603.

New Mexico reported: Metro 258,022 Urban 57,737

Rural 148,491 Frontier 41,375

the correct total for NM is 505,624.

11. Section Number: Indicator 10

Field Name: Frontier

Row Name: Living in frontier areas

Column Name: Year: 2006 Field Note:

It appears that the TVIS calculator for total children 0-19 in this report is not working: TVIS reports total 247,603.

New Mexico reported: Metro 258.022 Urban 57,737 Rural 148,491 Frontier 41,375

the correct total for NM is 505,624.

12. Section Number: Indicator 11

Field Name: S11\_50percent

Row Name: Percent Below: 50% of poverty

Column Name: Year: 2006 Field Note:

Calculated estimate. If 11% of children are <50% poverty and 31% are <100% poverty; and 23% of total population is <100% poverty, then 8% of total is below 50%

poverty. 11/31=x/23.

13. Section Number: Indicator 11 Field Name: S11\_100percent Row Name: 100% of poverty Column Name:

Year: 2006 Field Note:

current population survey, 2002-2003 estimate

14. Section Number: Indicator 11 Field Name: S11\_200percent Row Name: 200% of poverty

Column Name: Year: 2006 Field Note:

current population survey 2002-2003 estimate

15. Section Number: Indicator 12 Field Name: S12\_Children

Row Name: Children 0 through 19 years old

Column Name: Year: 2006 Field Note:

figure based on 2003 intercensal estimates, BBER/UNM.

505624 children age 0-19

11% below 50% federal poverty level or 55,619 in extreme poverty 14% between 50-99% of FPL, 70,787 children

25% below 100% fpl or 126,406 childre 28% at 100-200% fpl or 141,575 children

### **NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET** STATE: NM

SP#1	

PERFORMANCE MEASURE:

The number of New Mexico counties and tribal entities implementing positive youth development strategies defined by 6

key criteria

GOAL

DEFINITION

To promote positive youth development. throughout New Mexico

Numerator: Number County and Tribal Community Health Improvement Councils (CHICs) that meet five key criteria for implementing positive youth development. 1-CHIC has identified positive youth development as a priority in its annual plan; 2-CHIC membership includes at least two youth each year; 3-CHIC has at least one staff or contractor that has completed recommended training in positive youth development; 4-CHIC has a plan for at least one science-based intervention in the annual plan; 5- CHIC plan for youth involved youth and approved by youth; 6-CHIC coordinates efforts with School Health Advisory Committee (SHAC).

**Denominator:** Denominator Total number of County CHICs and Tribal CHICs in the state.

Units: 6 Text: Scale

HEALTHY PEOPLE 2010 OBJECTIVE

The National Initiative to Improve Adolescent Health by the Year 2010 (NIIAH 2010) has identified 21 Ddefines adolescent health broadly, complementing the traditional focus on categorical health problems and antecedents by concepts of healthy adolescent development and health-promoting environments to provide a proactive foundation for promoting the health and safety of adolescents and young adults. The NIIAHs goal is to foster cooperation amongpartners, including states: its framework seeks new approaches, work with variety partners, sction-oriented perspective on youth development.

**DATA SOURCES AND DATA ISSUES** 

This is not a population-based indicator but rather an indicator of the state program's performance based on 6 criteria. Population-based proxy measures for positive youth development are in the NM Youth Risk Resiliency Survey and for youth age 18-24 & adults in the NM Behavioral Risk Factor Surveillance System. This data is available by county, and will be collected every two years based on reports of the 6 criteria; first data available for 2005 report. The measure should show some impact if the assumptions about criteria are related to effectiveness of the program effort.

SIGNIFICANCE

The National Initiative is based on a comprehensive approach which recognizes that seemingly isolated adolescent problems are influenced by common antecedent factors – those that protect and those that can jeopardize health and safety. Youth opportunities and supports are increasingly important in a world of rapidly changing labor markets, rationales for civic engagement, and a growing need to communicate and cooperate across age, ethnic, religious, cultural, and gender boundaries. Youth who spend time in communities that are rich in developmental opportunities for them experience less risk and show evidence of higher rates of positive development. Diverse program opportunities are more likely to support broad adolescent development and attract the interest of and meet the needs of a greater number of youth . Cultural groups vary in what characteristics they most value for their youth and adults. Core human needs that researchers agree are universal include the need to feel competent, to be socially connected, to feel valued and respected, to actually be making a difference in one's social group, to feel that one has some control over one's own behaviors and experiences, and to have one's physical and emotional needs met. Social assets include: caring and compassion; character; competence in academic, social, and vocational arenas; confidence; connections.

**OBJECTIVE** 

2006 2007 2008 2009 2010

2

PERFORMANCE MEASURE: Percent of first newborns/moms receiving support services/parenting through community home visiting/support programs

GOAL The development of a state-wide system of family support which promotes optimal infant & child development and well

**DEFINITION** The proportion of new mothers who report home visiting or other support services before delivery and after delivery is

reported in NM PRAMS.

Numerator:

Numerator: Number of first newborns/moms receiving HV or support services

**Denominator:** Denominator: Total number of first births annually (by county) & for state

Units: 100 Text: percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** 

PRAMS and Families First data for #1; would have to explore if there are existing data bases or develop for #2.

SIGNIFICANCE

In today's world there are increasing challenges of parenting and providing stable family life as demonstrated by the following: changes in family structure--increase in teen & single parents and those not prepared to parent their children; increased divorced rate, children spending less time with their parents and more children living in foster homes; increased

exposure to violence through media; increasing number of children living in poverty

**OBJECTIVE** 

2006 2007 2008 2009 2010

PERFORMANCE MEASURE: Reduce unintended pregnancy in New Mexico to less than 30% of births

GOAL To improve maternal and infant health by reducing unintended pregnancy in New Mexico to less than 30% of live births.

**DEFINITION**Unintended pregnancies are those that a mother reported as not wanted or wanted later; Intended pregnancies are those a

mother reported as wanted then or sooner.

Numerator:

Number of mistimed and unwanted births from NM PRAMS

Denominator:

Number of NM Resident Births
Units: 100 Text: percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

DATA SOURCES AND DATA ISSUES

NM PRAMS: 1997 is our first year of data; data will be ready for analysis in November 1998. Vital records for 1997 closed in

July 1998; data are weighted by CDC PRAMS, accounting for factors in the sample frame, response rates per stratum, and response rate per question. Henceforth, data for each year will be produced the winter of the following year, 1998 data in

November 1999 and so on.

SIGNIFICANCE Unintended pregnancy is associated with demographic characteristics of teen ages, single women/men, lower education

and income levels in women and men; maternal health problems of poor access to family planning services, late prenatal care, smoking, family violence and other family stressors; infant outcomes of low birth weight, late or no infant health care

including imunizations.

OBJECTIVE 2006 2007 2008 2009 2010

PERFORMANCE MEASURE: Reduce the number of children witnessing violence (exposed to domestic or sexual violence) as expressed by percent of

children present at a domestic violence scene.

GOAL Reduce the number of children witnessing violence (exposed to domestic violence or sexual violence).

**DEFINITION**The percent of children who were present at a domestic violence scene as reported by law enforcement.

Numerator:

The number of children present at a domestic violence scene as reported by law enforcement.

Denominator:

The number of domestic violence police reports

Units: Text: per cent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

DATA SOURCES AND DATA ISSUES

UCR data has its own limitations, mainly limited reporting by local law enforcement jurisdictions, and limited disclosure by

the victims themselves. We hope to get a better measure developed that includes DV shelter and rape crisis center data. Because of a large degree of under reporting, these sources represent only a portion of the violence experienced by

children. There is no direct measure of children witnessing domestic violence.

SIGNIFICANCE

Many children and young adults are exposed to domestic violence in the home or experience some form of sexual violence from people they know. There is increasing documentation about the adverse effects, including increased substance abuse, teen pregnancy, truancy, suicidal behaviors, eating disorders and aggressive acting out behaviors. There is a profound lack

of mental health infrastructure to deal with these exposures, high prevalence of domestic violence in our society and significant lack of protective skills in avoiding acquaintance rape. We are using the rape rate as an index at the present time because it is accurate, can be tracked, and there is a clear correlation between children who witness violence and the

propensity to engage in violent acts including rape as they get older.

OBJECTIVE 2006 2007 2008 2009 2010

**DEFINITION** 

SIGNIFICANCE

**PERFORMANCE MEASURE:** 

GOAL

Increase the proportion of women who report having all six criteria of the NM Healthy Birth Index

To improve the health and well being of new mothers and infants by promoting healthy behaviors among expectant parents

in New Mexico.

The percent of new mothers for whom 1) the pregnancy was intended; 2) no binge or heavy drinking; 3) no smoking: 4) no physical abuse by husband or partner during pregnancy; 5) awareness & use of folic acid; and 6) entered prenatal care in first trimester.

Numerator:

The number of new mothers for whom 1) the pregnancy was intended; 2) no binge or heavy drinking; 3) no smoking: 4) no physical abuse by husband or partner during pregnancy; 5) awareness & use of folic acid; and 6) entered prenatal care in first trimester. BAsed on NM PRAMS, representative sample

The number of live births. Derived from sample statistics, NM PRAMS

Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** HP 9-1: Increase the number of intended pregnancies to 70%

HP 16-17: Increase abstinence by pregnant women from alcohol to 94%, tobacco to 99%; HP27-6: Increase smoking cessation from 14-30%. Related Objective: 15-34: Reduce the rate of physical assault by current or former intimate partners. HP 16-16 Increase pregnancies begun with optimum folic acid levels from 21% to 80%. HP16-6: Increase first

trimester care from 83-90%

This data is collected by the Pregnancy Risk Assessment Monitoring System, it is a core question for all PRAMS states. **DATA SOURCES AND DATA ISSUES** 

There may be under-reporting due to the nature of the question

Elements of the healthy birth index have potential for a highly positive impact on maternal and infant health, well-being and

outcomes.

**OBJECTIVE** 2006 2007 2008 2009 2010

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PERFORMANCE MEASURE: Reduce the proportion of women who report being physically abused by husband or partner during pregnancy.

Goal To improve the health and well being of new mothers and to reduce family violence and the risk of children being exposed

to family violence.

**DEFINITION** Rate: Weighted percent of women who report physical abuse by partner in pregnancy from PRAMS surveillanc

Numerator:

Numerator: Number women abused is an estimate derived from PRAMS surveillanc

Denominator:

Denominator Population of live births, estimate derived from PRAMS surveillance

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE See related HP 2010 objectives:

No specific Healthy People 2010 Objective for this age group and gender. Related Objective: 15-34: Reduce the rate of physical assault by current or former intimate partners. Target 3.3 physical assaults per 1,000 persons age 12 and older. Bseleine was 4.4 in 1998. Disparities reported: rate for females was 7.2 per 1,000 females; males 1.3 per 1,000 males.

DATA SOURCES AND DATA ISSUES

This data is collected by the Pregnancy Risk Assessment Monitoring System, it is a core question for all PRAMS states.

There may be under-reporting due to the nature of the question.

SIGNIFICANCE

Prenatal physical abuse of mothers can result in fetal death, early labor, preterm, low birthweight or maternal medical problems. It is associated with severe emotional distress and threatens healthy family life. Children who are exposed to

domestic violence are at increased risk for behavioral difficulties, emotional problems, poor academic performance,

delinquency and impaired health during adulthood

OBJECTIVE 2006 2007 2008 2009 2010

**PERFORMANCE MEASURE:** The Prevalence of Childhood Overweight & Obesity

To assure an environment in communities and schools that promotes healthy eating and physical activity patterns in GOAL

children and adolescents

**DEFINITION** Percent of children who are overweight or obese age 0-5

Numerator:

Number of overweight or obese children age 0-5 in New Mexico (equal to or greater than 90th percentile Body Mass Index

(BMI)

**Denominator:** Number of children age 0-5 in New Mexico

Units: 100 Text: 1

**HEALTHY PEOPLE 2010 OBJECTIVE** 

Reduce the proportion of children and adolescents who are overweight or obese

**DATA SOURCES AND DATA ISSUES** 

State WIC data Data Issues: State WIC data is limited and does not reflect the entire population, however, this data is

available at this time. The state will use Youth Risk Behavior Survey data next year.

**SIGNIFICANCE** 

Childhood obesity is associated with adverse medical and psycho-social consequences. Overweight acquired during childhood or adolescence may persist into adulthood with increased risks of some chronic disease later in life. As a result, the rising prevalence of obesity and chronic disease will place more burdens on the health care system, including increased costs of medical care. Following the published data from the CDC's Third National Health and Nutrition Examination Survey (NHANES III), concern has been expressed that the prevalence of obesity in children and adolescents may be increasing in New Mexico, but definitive data are lacking. Therefore, Title V leadership are committed to establishing a baseline to assess

the extent of obesity on childhood in New Mexico and develop a plan of action for its prevention.

**OBJECTIVE** 

2006 2007 2008 2009 2010